



COUNTY OF SAN DIEGO

HEALTH AND HUMAN SERVICES AGENCY



2010 and 2011 COMMUNITY ACTION PLAN

BOARD OF SUPERVISORS

Greg Cox, First District

Dianne Jacob, Second District

Pam Slater-Price, Third District

Ron Roberts, Fourth District

Bill Horn, Fifth District



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COMMUNITY ACTION PLAN 2010 and 2011

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**COMMUNITY SERVICES BLOCK GRANT
2010/2011 PROGRAM YEAR COMMUNITY ACTION PLAN
COVER PAGE**

TO: Department of Community Services and Development
Attention: Field Operations
P.O. Box 1947
Sacramento, CA 95812-1947

FROM: Agency: **County of San Diego,
Health and Human Services Agency
Community Action Partnership**

Address: **1255 Imperial Avenue, Suite 743**

City: **San Diego, CA 92101**

Agency Contact Person Regarding Community Action Plan

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CERTIFICATION OF COMMUNITY ACTION PLAN AND ASSURANCES

The undersigned hereby certify that this agency complies with the Assurances and Requirements of this 2010/2011 Community Action Plan and the information in this CAP is correct and has been authorized by the governing body of this organization.

Thomas J. Pastuszka

Clerk of the Board of Supervisors

6.25.09

Date

René G. Santiago
Executive Director

June 4, 2009

Approved and/or authorized by the Board
of Supervisors of the County of San Diego
Date *6/16/09* Minute Order No. *4*
THOMAS J. PASTUSZKA
Clerk of the Board of Supervisors
May V. Garcia
Deputy Clerk

2010-2011 San Diego Community Action Plan

EXECUTIVE SUMMARY

The 2010-2011 San Diego Community Action Plan highlights priorities for the collaborative partnerships of San Diego County seeking to enhance individual, family and community self-sufficiency with the use of Community Services Block Grant funding for the next two years. The Community Action Partnership (CAP) of San Diego remains committed to fulfilling our vision and mission of assisting low income families and individuals to achieve self sufficiency through: 1) employment assistance 2) asset building; 3) providing supports to overcome barriers; and 4) promoting and facilitating community capacity building. The operation plan for 2010-2011 provides a detailed road map of how priorities aligned to the County and Agency's strategic plans address the needs identified through an extensive community input process. The highest ranked priorities identified by the community were employment, employment supports, housing and shelter, emergency food assistance, and improved coordination/access to support services.

As part of the overall County's enterprise-wide GMS 2.0 effort, this roadmap that addresses the priorities will also focus on opportunities to leverage technology to streamline access to services along with a commitment to develop new and creative ways of doing business. Promoting and facilitating community capacity by increasing access to online or web-based tools while identifying easier and quicker ways of accessing information and services in order to meet the needs of our families is vital. CAP San Diego will continue to seek out opportunities that strengthen the linkages with 211, education partners, law enforcement, Family Resource Centers, Family Self Sufficiency providers, and other partners.

This plan details strategies that combined both efforts to focus opportunities to leverage partnerships and be responsive to the identified needs through the community planning process. As in previous years, Earned Income Tax Credit (EITC) and financial literacy will continue to be core strategies in the 2010-2011 San Diego Community Action Plan. EITC and the free tax assistance sites offer the most effective tool to lift low-income working families out of poverty in America. Tax season 2008 marks the sixth year of CAP's participation in the EITC campaign and over ninety percent (90%) of the tax filing was done electronically, reducing costs and benefiting families and communities quickly.

San Diego CAP will continue to build upon the ongoing efforts within our agency and other committed partners to improve access to food, nutrition, employment assistance and shelter. While these priorities remain consistent from previous years, the methods used to provide assistance to low-income families in the next two years will be continuously refined due to the economic downturn and growing demand. Maximum use of vouchers for emergency shelter; nutrition education linked to food assistance; innovative strategies for finance education; and maximizing call centers and websites to provide information and referrals will be critical to address the rising demand for services.

AGENCY VISION AND MISSION STATEMENT

VISION STATEMENT:

The vision of the Community Action Partnership of San Diego County is that the County's economically disadvantaged individuals and families are safe, healthy, and thriving.

The vision of the Community Action Agencies nation wide is:

"Community Action changes people's lives, embodies the spirit of hope, improves communities, and makes America a better place to live. We care about the entire community, and we are dedicated to helping people help themselves and each other."

The Community Action Partnership of San Diego County embodies the national vision and supports the County's vision of Safe, Healthy, and Thriving Communities.

MISSION STATEMENT:

The Mission of the Community Action Partnership is to "Empower economically disadvantaged individuals and families to achieve their highest level of self-sufficiency and well-being".

The Mission of the Health and Human Services Agency, in which the Community Action Partnership is administratively located, is:

"Make people's lives safer, healthier, and self-sufficient by managing essential services"

The Community Action Partnership promotes its Vision and Mission as well as that of the County of San Diego through the integration of regional initiatives and priorities that assist low-income families and individuals to acquire skills and knowledge, increase income and promote asset building to achieve self-sufficiency.

SAN DIEGO COUNTY STRATEGIC PLAN



VISION

Safe, Healthy, Thriving
 San Diego
 Communities

MISSION

To make people's lives
 safer, healthier and
 self-sufficient by
 managing essential
 services

VALUES

Integrity & Accountability
 Customer Service
 Innovation
 Flexibility
 Results

KEY SERVICE AREAS

Assisting At-Risk and
 Vulnerable People to be
 Safe, Healthy and
 Self-Sufficient &
 Protecting the
 Public's Health

For more information contact the
 HHSA Office of Strategy
 Management at 619-685-2244.

For the County of San Diego
 Strategic Plan, go to:
<http://www.sdcountry.ca.gov/caof/0005/stratplancomplete.pdf>

Mission Critical Services, Action Statements & Results Indicators*

PREVENTION *Provide prevention and early intervention services to maximize the health, safety and well-being of our community.*

1. Completion of recommended number of well-child and prenatal visits
2. Preparation of children and youth to transition to adulthood
3. Receipt of education and prevention services
4. The impact of chronic and acute diseases and spread of infectious disease

ACCESS *Provide outreach and links to services to help at-risk children, families and vulnerable adults lead safe and healthy lives, and become self-sufficient.*

5. Individuals provided assistance accessing services
6. Enrollment in medical, dental and behavioral health services
7. Average wait times to access services
8. Receipt of sustainable financial support by eligible individuals

PROTECTION *Provide services that protect children, families and vulnerable adults from dangerous conditions.*

9. Protection from abuse and neglect
10. Permanency and stability in living situations
11. Continued level and need for services

TREATMENT & CARE *Provide quality treatment and care to improve physical health, mental health, and reduce dependency on public resources.*

12. Status of well-being from intake to re-assessment or discharge
13. Participation in employment, education and other productive activities

PREPAREDNESS & RESPONSE *Monitor, identify and respond to health-related events and behaviors, while preparing the community to react and recover from disasters.*

14. Response time for selected reportable diseases and newly emerging public health threats
15. Readiness to respond and mobilize in a disaster

COMMUNICATION *Ensure timely and accurate communication of risks to improve overall community health and well-being.*

16. Timeliness and strategic dissemination to selected populations
17. Impact on awareness and/or behavior as a result of education or health promotion efforts

OPERATIONAL EXCELLENCE *For excellence in public services, HHSA must be a dynamic agency that is fiscally stable, responsive to customers and nurtures a workforce that is skilled, diverse and engaged. To accomplish these goals, the Agency adheres to the following disciplines:*

- **FISCAL STABILITY:** Ensure fiscal responsibility and integrity by living within our means and maximizing external revenue streams.
- **CUSTOMER SERVICE:** Provide customer-focused and culturally competent services timely and accurately.
- **LEADERSHIP:** Deepen partnerships and create opportunities between communities and government.
- **WORKFORCE EXCELLENCE:** Develop a talented, diverse, engaged, and satisfied workforce by encouraging employees to reach their full potential.
- **ESSENTIAL INFRASTRUCTURE:** Identify and address critical infrastructure needs and practice environmental responsibility.
- **INFORMATION MANAGEMENT:** Organize, access and analyze data for operational effectiveness and efficiency.
- **ACCOUNTABILITY & TRANSPARENCY:** Conduct County business as openly as possible, resulting in the ethical use of public funds.
- **CONTINUOUS IMPROVEMENT:** Maximize efficiency and effectiveness of services through innovation and continuous improvement.

Revised 10/15/08

*Result Indicators are performance measure categories that monitor the Agency's progress in achieving the Mission Critical Services.

Requirement 1

COMMUNITY INFORMATION PROFILE AND NEEDS ASSESSMENT

1. COMMUNITY PROFILE

The Community Information Profile is updated every two years. For 2010-11, Community Action Partnership (CAP) San Diego utilized the same method as in 2008-09 and conducted public hearings in the six regional areas served by the Community Action partnership. The Needs Assessment tool was revised to meet the current program needs and public hearing meeting attendees were asked to complete, discuss and provide input. The survey tool was also made available on-line and shared with Family Self-Sufficiency provider agencies and community members to complete and submit input regarding the Family Self-Sufficiency services currently being provided in their communities by our contracted agencies.

In addition, CAP utilized Health and Human Services Agency demographic reports as well as the 2000 U.S. Census, Center on Policy Initiatives (CPI) and San Diego Association of Governments (SANDAG) data to develop the Community Profile.

A. THE REGION – SAN DIEGO COUNTY DESCRIPTORS

i. Geography and Characteristics

San Diego County is a county located near the Pacific Ocean in the far southwest of the U.S. state of California. As of 2008, the State of California estimates San Diego's population to be 3,146,274 people, increasing its rank to second place, ahead of its northern neighbor Orange County.

San Diego County lies just north of the Mexican border—sharing a border with Tijuana and lies south of Orange County. It is home to miles of beaches, a mild Mediterranean climate and 16 military facilities hosting the United States Navy, the United States Coast Guard and the United States Marine Corps.

The international border has both positive and negative impacts on San Diego County. The proximity of Mexico to San Diego is an additional tourist attraction and Mexican citizens spend substantial dollars in San Diego County. At the same time, the border also contributes to crime, health care costs, and heightened international security concerns.

San Diego County includes 18 incorporated cities, seventeen (17) Indian reservations and seven military bases. San Diego has the largest number of Indian reservations in the nation with Native Americans living both on and off their reservations, many residing in urban areas. Military installations include homeports for aircraft carriers, surface ships, US Navy ships (military sea life command ships), submarines and coastal patrol boats for the US Navy SEALs (Sea Air Land Special forces). In addition, the US Marine Corps' largest installation, Camp Pendleton, is located in the County. There are 95,000 uniformed military personnel assigned to a variety of commands and units in the San Diego area. These dependents and families make the total military population in the county in the neighborhood of 175,000. Since the beginning of the Iraq conflict, many of these personnel have been deployed for combat. Many in the military reserves have also been called to active duty. These deployments result in a significant loss of revenue for San Diego. Many of the families of the deployed personnel remain in San Diego and require social service assistance, including services provided by the Community Action Partnership.

ii. Poverty

According to the Center on Policy Initiatives, the poverty rate in San Diego County in 2007 was at 11.1%. The national poverty threshold is widely acknowledged to be far less than the real poverty level based on the cost of living in –high-cost areas such as San Diego, and significantly undercounts the region's poor. 110,124 children in the county (15.1%) lived in poverty and 257,224 more (35.2%) in economic hardship in 2007. These families are headed by single mothers who continue to be by far the most likely to live in poverty (29.0%) and married couples with no children are the least likely (2.3%). In 2007, the county had 52,562 families and 48,156 other single adults in official poverty.

The population, which is currently a little over 3.0 million, has steadily increased from 2.5 million in the 1990 census, and 1.8 million in the 1980 census. The largest municipality, the City of San Diego, is the second most populous city in the State of California and the seventh in the United States.

In January 31, 2008, the San Diego Regional Task Force on the Homeless (RTFH) conducted a point-in-time count of homeless persons living in San Diego County. 3,726 homeless were counted in emergency shelters and transitional housing for a total of 7,582 homeless persons, this is an increase of 9% from the 2006 count of an estimated 6,968. Many of these homeless individuals suffer from serious mental health issues which may stem from increased levels of stress and/or depression. The mental health illness in turn contributes to poverty.

iii. Ethnicity

Racial disparities in income and poverty continue to be significant in San Diego County. While poverty rates since 2000 declined for non-Hispanic Whites, Asians and Hispanics, it increased by nearly 3% among African Americans. The Region's total population grew 8.4 percent between 2000 and 2005. During this same period, populations classified as *Hispanic* and *non-Hispanic Asian* and *All Other Groups* grew at a faster rate than the region as a whole. The Hispanic population grew by the largest amount in percent and numeric terms by over 129,000 (17.2%) people to a total of 880,030 in 2005. SANDAG forecasts that by 2020, Hispanics will account for 59 percent of the population growth.

The ethnic breakdown for San Diego County is presented in Table 1 below.

Table 1. Ethnic Breakdown in San Diego	
RACE	% OF POPULATION IN 2008
--Hispanic	30%
--White	50%
--Black	5%
--American Indian	<1%
--Asian	10%
--Pacific Islander	<1%
--Other	<1%
--Two or more races	3%

iv. Household Size

The average household size in San Diego County is presently 2.73 persons per household. 21.80% of people are married with children, 8.30% are single parents.

v. Education

San Diego County has a high school graduation rate of 77%, compared to California's 80%. The rate of high school graduation varies greatly by community and school district. For example, Vista Unified has the lowest percentage (53%) of high school graduates while Poway Unified with a slightly higher number of students has a graduation rate of 89%.

vi. Income Distribution

Earnings have stagnated or dropped for most low-wage workers. Adjusted for inflation, real median earnings for the population over age 16 in San Diego decreased from \$32,232 in 2006 to \$31,919 in 2007 which is a decrease of 0.97% (this includes full-time and part-time employment). Among the 958,582 individuals working full-time for the whole year, real earnings decreased to a median of \$47,955 for men and \$38,680 for women. The most striking statistic and one with significant implication for services is that almost half (45.1%) of county residents over age 16 who lived below the official poverty level were working.

The maps in the attached appendix A provide information by income range for each of the six Health and Human Services Agency geographic service regions.

Income in San Diego County is distributed in a teardrop shape, with large concentrations in the lower incomes and diminishing numbers as incomes rise. Among the region's households, 41.4% have an annual household income of less the \$50,000. Only 1.2% of the region's households have income greater than \$150,000. The most recent overall income data for the San Diego area is summarized below:

Table 2. CHANGE IN HOUSEHOLD INCOME
 (real 1999 dollars, adjusted for inflation)

	April 2000 (Census)	January 2008	2000 to 2008 Change	
			Numeric	Percent
Less Than \$15,000	124,337	122,053	-2,284	-1.8%
\$15,000 to \$29,999	179,090	182,934	3,844	2.1%
\$30,000 to \$44,999	172,183	182,357	10,174	5.9%
\$45,000 to \$59,999	138,080	150,731	12,651	9.2%
\$60,000 to \$74,999	109,865	123,118	13,253	12.1%
\$75,000 to \$99,999	114,723	132,888	18,165	15.8%
\$100,000 to \$124,999	65,355	78,591	13,236	20.3%
\$125,000 to \$149,999	32,472	41,038	8,566	26.4%
\$150,000 to \$199,999	29,090	38,408	9,318	32%
\$200,000 or more	29,482	37,333	7,851	26.6%
Total Households	994,677	1,089,451	94,774	9.5%

vii. Employment by Industry Sector

The following table shows the San Diego County Employment by Industry Sector. The industries in which job seekers with minimal job experience or job training have been the most affected by the current economy. The table below reflects a loss of jobs in manufacturing, construction and hospitality industries the very jobs which low-income individuals are currently being prepared for, thus requiring a shift in training and job placement strategies.

Table 3. Decline in Available Jobs							
Industry	Nov 2008	Dec 2008	Change		Dec – 2007	Dec 2008	Change
	Revised	Prelim				Prelim	
Total jobs (all Industries)	1,313, 500	1,311,300	(2,200)		1,329,800	1,311,300	(18,500)
• Farm Jobs	11,000	9,900	(1,100)		10,000	9,900	(100)
• Non-Farm Jobs	1,302,500	1,301,400	(1,100)		1,319,800	1,301,400	(18,400)
--Natural Res.& Mining	500	500	0		400	500	100
--Construction	78,000	77,100	(900)		82,400	77,100	(5,300)
--Manufacturing	100,800	100,700	(100)		102,300	100,700	(1,600)
--Trade, transport. & Utilities	222,200	223,200	1,000		232,000	223,200	(8,800)
--Information	38,300	38,400	100		39,100	38,400	(700)
--Financial Activity	74,200	74,300	100		77,900	74,300	(3,600)
--Professional and business services	216,600	216,600	(600)		217,900	216,000	(1,900)
--Educational & Health Services	134,200	134,600	400		131,500	134,600	3,100
--Leisure and Hospitality	162,100	161,000	(1,100)		160,700	161,000	300
--Other Services	48,500	48,800	300		49,500	48,800	(700)
--Government	227,100	226,800	(300)		226,100	226,800	700

Source: EDD, Labor Market Information Division, Current Employment Statistics (CES) Program.

viii. Unemployment Rate

San Diego County's unadjusted unemployment rate for February inched upward to 8.8% the highest rate since the early 90a, from the revised January rate of 8.7%. The rate of 8.8% is three and eight-tenths higher than the year-ago February rate of 5.0% percent. This compares with an unadjusted California unemployment rate of 10.9%, three-tenths percent above the prior month and four and seven-tenths percent higher than the February '08 rate of 6.2%. 9.1% and the national rate of 8.9% during the same period. The unemployment rates for San Diego, California and the U.S. have been revised by the Department of Labor, Bureau of Labor Statistics using a revised methodology and benchmarking to March, 2004. *Unemployment Data Source: State of California, Employment Development Department, Labor Market Information Division.

ix. Cost of Living

Even before the recent spike in food and gas prices, San Diego County ranked as the 11th-most expensive metropolitan area in the country, according to data released by the Council for Community and Economic Research.

The county's cost of living is 47 percent above the national average, according to the council, a private organization near Washington, D.C., that compiles a quarterly cost-of-living index. In San Diego, the most expensive item was the cost of housing, which even after two years of decline remains more than twice the national average.

Based on data released by the National Association of Realtors, the median price of existing homes sold in San Diego County is \$280,000 which has dramatically dropped in the last two years. Thanks to San Diego County's mild weather, which requires less use of heating and air conditioning, utility costs were below the national average. All other categories were costlier than average.

In 2008, the cost of living index in San Diego County was: 143.8 which is substantially higher than the U.S. average of 100. The cost of living in San Diego County far exceeds the wages in the region.

x. Housing

Prior to 2006, San Diego experienced a dramatic growth of real estate prices, to the extent that the situation was sometimes described as a "housing affordability crisis". Median house prices more than tripled between 1998 and 2007. According to the California Association of Realtors, in May 2007, a median house in San Diego cost \$612,370.

From 2005 to 2007, San Diego experienced a greater than 15% decline in real estate prices, which continued to accelerate into 2008. The two-year drop already experienced is worse than the four-year period between June, 1992, and November, 1996, when the region experienced an 11.8% decline in housing prices. In the first quarter of 2008, the number of foreclosures repossessed by banks exceeded the number of home sales.

Federally funded rental assistance programs for low-income families are administered by local public housing agencies within San Diego County. These agencies include various city housing authorities, commissions, and departments. These programs provide monthly rental assistance towards the rent of eligible participants and are funded by the federal Department of Housing and Urban Development (HUD). The amount of rental assistance is based on the family size and the income of the participants. The waiting lists for federally funded rental assistance programs are extremely long and families often wait years for housing assistance.

In addition to local government housing programs, community based organizations offer HUD funded housing programs and own and operate privately funded low-income housing complexes. Despite these publicly funded resources and privately funded programs that include housing units, there continues to be insufficient resources to meet the affordable housing needs of the mainstream low-income families and their children and the homeless populations which present many chronic and mental health issues. The Census 2000 data and the Community Action Partnership needs assessment support the conclusion that housing needs are a major concern in all parts of the county and are especially critical for low-income families and individuals, in particular senior citizens.

xi. Food

The declining economy has had a huge impact on residents of San Diego County. The surge in demand from tens of thousands of families and slowing food donations left the San Diego Food Bank (SDFB) with a gaping deficit of donated food in the third quarter of 2008. The SDFB blames the increasing demand for food assistance on the economic crisis affecting large numbers of low income working families and an increasing number of middle class families. Programs such as the SDFB's Emergency Food Assistance Program (EFAP) illustrate the surge in demand. EFAP, intended for families in immediate need, served 21,043 more families from January to December 2008 than the same period in 2007.

Members of vulnerable population groups in San Diego, particularly children and the elderly are at risk of adverse health outcomes from poor nutrition which can lead to life threatening health issues such as high blood pressure and diabetes. Access to food is an important health issue for the homeless and those struggling on low and/or fixed incomes.

The Health and Human Services Agency (HHSA) in partnership with the San Diego Hunger Coalition, community based organizations; health service providers and the San Diego Food Bank have been working closely to address the State's concerns regarding San Diego County's low Food Stamp program participation. In addition HHSA launched campaigns geared towards mitigating child obesity and other health related problems. In February 2009, the San Diego Food bank launched "the community cares" project which will offer food, pre-screening for Food Stamps and information on a range of programs offering employment and training advice, medical care, housing assistance, and disabled/ elderly.

xii. Transportation & Mobility

Like most major metropolitan areas around the country, the San Diego region has seen a gradual decline in commuting by carpool and transit in favor of single drivers. Between 1990 and 2000, the percentage of residents who drove alone to work increased, while commuting by all other modes decreased or stayed the same. In part, this shift to solo commuting reflects the increase in two-worker households, which in turn has increased the need for car trips – and the convenience and flexibility of the personal automobile. Throughout the 1980s, travel (as measured in vehicle miles traveled or VMT) grew about twice as fast as population, primarily because of growth in two-worker households and longer commute distances. During the 1990s, growth in vehicle miles traveled was 50 percent higher than population growth. The need for low-income families and individuals to have more than one job coupled with the high cost of gasoline affects the amount of dollars available for essential needs.

According to SANDAG's 2008 quarterly transportation report, under Traffic and Demand Management, the Freeway Service Patrol assisted approximately 16,430 motorists, about 5.5 percent more than last quarter. The vanpool participation rate increased by 9.6 percent in the last quarter (585 vanpools to 641). Average ridership per vanpool was approximately 8.3 passengers, with 5,326 daily passengers participating in the program. The 511 call system received 191,947 calls, up nearly five percent from the previous quarter and raising the cumulative call volume to just under 1.2 million calls.

B. SELF-SUFFICIENCY RESOURCES FOR LOW-INCOME RESIDENTS

i. CalWORKs Program

The CalWORKS (CW) program is designed to transition people from Welfare-to-Work. It provides temporary cash assistance to eligible families with minor children, to move families with children from dependency to self-sufficiency through employment. The Welfare-to-Work Component of CW is a mandated statewide employment and training program that is administered in each county under a State approved plan. In San Diego County, the Health and Human Services Agency administers CalWORKs in each of the regions.

In four of the regions, Welfare-to-Work (WtoW) employment services are being provided by the private sector (both for-profit and non-profit) under contract with the County, and in the remaining two regions by County staff. Core activities include: Unsubsidized employment; Subsidized/private employment; On-the-job training; Work Study; Work experience; Self-employment; Vocational education and training (limited time frame).

The CalWORKs program also provides supportive services to assist clients with other needs related to employment and program participation. Supportive services include payment for childcare, transportation costs, and authorized work related expenses. With limited exceptions, CalWORKs recipients must be engaged in employment-related activities at least 32 hours per week. In a two-parent household, the participating parent must complete 35 hours per week of WtoW activities. Participation includes employment hours and other approved WtoW activities designed to eliminate barriers to employment.

ii. Child Care Services

After housing, childcare continues to be the next highest expense for working parents. Parents entering the job market in low paying jobs must pay the high cost of childcare and still have enough to live on. For those in low paying jobs, it can actually be more economical not to work. Family Self-Sufficiency clients report that affordable quality childcare is often found in locations not easily accessible via public transportation, creating an additional hardship.

Subsidized Child Care is provided for some families with limited financial resources. To be eligible for child care services, a family must be participating in CalWORKs Welfare-to-Work (WtoW) activities or have limited financial resources. WtoW participants can get subsidized child care through the County of San Diego, Health and Human Services Agency. Participants are eligible while they are participating in approved WtoW activities until their children reach age 13 or the family reaches an income above the eligibility limits. For questions regarding the child care program, families can call the Child Care Info-Line at (800) 716-4300.

The County of San Diego is part of a consortium with more than a dozen agencies funding and maintaining a web-based YMCA - Centralized Eligibility List (CEL), where parents can fill out an application to receive assistance to pay for child care. This service allows families to apply for subsidized childcare through an on-line service that maintains a waiting list. All agencies have access to the waiting list. The Alternative Payment Program provides subsidized child care to some low-income working families who need child care while working or in training. Priority is given to children at risk of abuse, and to foster children whose foster parents work, and then to the lowest-income families. To be evaluated for eligibility for subsidized child care, a family must register on the Centralized Eligibility List (CEL).

The CEL website at www.ChildCareSanDiego.com to register, or phone the Child Care Resource Line at: Inside San Diego County - (800) 481-2151 or Outside San Diego County - (619) 521-3070

iii. Food Stamp Program

Although not yet adopted by the State of California, the Farm Bill passed in 2008 renamed the Food Stamp Program as the Supplemental Nutrition Assistance Program (SNAP) to emphasize the intent of the program to increase food budgets for the purchase of nutritious foods by low-income households. In fact, electronic benefits transfer is now in universal use, so there is no longer any use of food stamps. SNAP is the nation's basic safety net against hunger. Because this is a federal entitlement program, all those who qualify for benefits should receive them. SNAP provides a monthly benefit amount to eligible low-income families that can be used to purchase food.

Eligibility for SNAP is based on household income and assets. Many able-bodied, childless, unemployed adults have time limits on their receipt of food stamp benefits.

In San Diego County, Health and Human Services Agency (HHSA) there are ten regional Family Resource Centers (FRC) that can be accessed by the community to apply for benefits including the Supplemental Nutrition Assistance Program (SNAP). In the last two years HHSA has been working in partnership with the San Diego Hunger Coalition, Public Health, the San Diego Food Bank and other non-profit agencies to strengthen efforts to increase Food Stamp participation in San Diego. Food Stamp participation rates increased to 40.8% comparing December 2007 to December 2008. During the same time period, the number of participants increased 19.8%. HHSA has also put a lot of effort in creating a business process re-engineering (BPR) taskforce that has been focusing on streamlining the intake process to reduce the number of visits clients have to make to an FRC in order to apply for benefits, including SNAP. In addition, on March 9, 2009, HHSA inaugurated a new Family Regional Center in the North Central Region which has state-of-the art equipment and capacity to provide general case information to clients calling in without having to wait for a particular worker. Any staff person manning the phone system will have the ability to review and make case entries on client case.

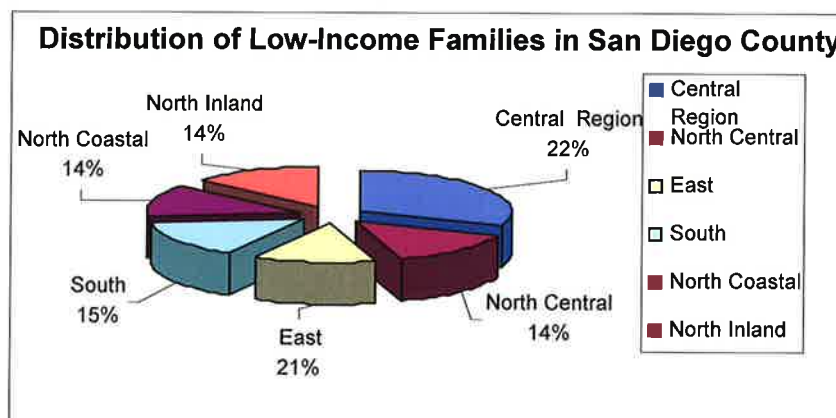
iv. San Diego Workforce Partnership

San Diego Workforce Partnership provides no-fee employment related services to local businesses and job seekers through a network of countywide partnerships. Businesses look to the Workforce Partnership for skilled employees, expertise in job training and supportive services. Job seekers, both adult and youth, look to the Workforce Partnership for referral to and placement in jobs, education, and training programs. The Family Self-Sufficiency service providers contracted by the Community Action Partnership of San Diego are required to secure Memorandum of Agreements and build partnerships with their respective regional WIA career centers and to utilize the partnership as a primary employment resource for their customers.

C. HEALTH AND HUMAN SERVICES AGENCY - SERVICE REGIONS

The majority of San Diego County's population resides in the City of San Diego. The boundaries of the City of San Diego encompass a large portion of the urban county. The Health and Human Services Agency is divided into six geographic service regions. The incidence of poverty for the County by Region is shown below in Table 4. Appendix B (Asset Maps) also provides a graphical representation of the distribution of low income-families and resources in the San Diego County area.

Table 4



i. Central Region

The Central Region is located within the City of San Diego, and comprises 48 neighborhood communities. Home to approximately 655,295 residents, the ethnic/racial makeup of the region is Hispanic, White, African-American, Asian/Hawaiian/Pacific Islander, Native American and Other. The Central Region is one of two regions in which County staff administers Welfare-to-Work services to families receiving CalWORKs public assistance. Additionally, CAP San Diego administratively resides in the Central Region.

The Central Region is one of the most densely populated and diverse regions in the county. The region has significantly higher rates of child abuse, domestic violence and crime. It also has some of the county's poorest communities.

Significant growth has been observed in the Mid-City and Northeast portions of the region, which have grown at rates well above the countywide averages. The region is experiencing a significant growth in the Hispanic population and slight growth in the Asian population. The region has the highest concentration of households with incomes below the poverty level. Central Region's population below the Federal Poverty Level accounts for 31% of the population below the Federal Poverty Level in the entire county.

Table 5 below provides a side-by-side comparison between Central Region and San Diego County by household size, income and ethnic background. Appendix B (Asset Maps) provides a graphical representation of the distribution of low income-families in the Central Region.

Table 5. Population and Housing Estimates Central vs. Countywide (SANDAG, CURRENT ESTIMATES (2006))	Central Region	SD County
Population	655,295	3,051,280
Average Household Size	2.71	2.77
Median Income (not adjusted for inflation)	\$51,108	\$47,955
Ethnic Background		
Hispanic	35%	30%
White	37%	50%
Black	11%	5%
American Indian	.4%	<1%
Asian	14%	10%
Other	3%	3%

ii. East Region

The East Region is home to approximately 384,211 people. The ethnic makeup of the East region is White, Hispanic, Asian, African-American and "Other". Native Americans are an important segment of East region's population as there are several reservations located in the rural areas of the region. The East region includes a mixture of urban and rural communities. Significant employers in this region include Indian gaming (casinos).

The chart below (Table 6) provides a side-by-side between East Region and San Diego County by household size, income and ethnic background. Appendix B (Asset Maps) provides a graphical representation of the distribution of low income-families and resources in the East Region.

Table 6. Population and Housing Estimates East vs. Countywide (SANDAG, CURRENT ESTIMATES (2006))	East Region	SD County
Population	384,211	3,051,280
Average Household Size	2.69	2.77
Median Income (not adjusted for inflation)	\$61,727	\$47,955
Ethnic Background		
Hispanic	19%	30%
White	68%	50%
Black	5%	5%
American Indian	1%	<1%
Asian	4%	10%
Other	3%	3%

iii. North Central Region

Ethnic and cultural diversity is a primary strength of the North Central region. This ethnically and culturally diverse population speaks more than 50 languages and dialects. Three military installations are located here and many military personnel and their families live in this region. In families with children, 64% are single female parent families while only about 31% have both parents in the family.

In the first six months of 2008 calendar year almost half the families served by the FSS program in the region reported incomes below 50% of the poverty level – making their financial situation severely limiting. In the North Central Region, the ethnic make up is White, Asian, Hispanic, African American, Native American, Native Hawaiian, Pacific Islander and some other race.

The chart below (Table 7) provides a side-by-side comparison between North Central region and San Diego County by household size, income household and ethnic background. Appendix B (Asset Maps) provides a graphical representation of the distribution of low income-families and resources in the North Central Region.

Table 7. Population and Housing Estimates North Central vs. Countywide (SANDAG, CURRENT ESTIMATES (2006))	North Central Region	SD County
Population	582,715	3,051,280
Average Household Size	2.56	2.77
Median Income (not adjusted for inflation)	\$85,675	\$47,955
Ethnic Background		
Hispanic	11%	30%
White	65%	50%
Black	3%	5%
American Indian	.2%	<1%
Asian	18%	10%
Other	3%	3%

iv. **North Coastal Region**

The North Coastal Region consists of six cities and over a dozen communities that stretch geographically from Del Mar in the south to the Orange County border in the north and east to include Vista and Rancho Santa Fe. The US Marine Corps' largest installation, Camp Pendleton, is located in the North Coastal Region.

The chart below (Table 8) provides a side-by-side comparison between North Coastal region and San Diego County by household size, income, household size and ethnic background. Appendix B (Asset Maps) provides a graphical representation of the distribution of low income-families and resources in the North Coastal Region.

Table 8. Population and Housing Estimates North Coastal vs. Countywide (SANDAG, CURRENT ESTIMATES (2006))	North Coastal Region	SD County
Population	321,141	3,051,280
Average Household Size	2.76	2.77
Median Income (not adjusted for inflation)	\$76,573	\$47,955
Ethnic Background		
Hispanic	21%	30%
White	66%	50%
Black	4%	5%
American Indian	.4%	<1%
Asian	6%	10%
Other	2%	3%

v. **North Inland Region**

The North Inland Region consists of four cities and communities that stretch from Fallbrook, San Marcos, and Rancho Peñasquitos in the west all the way to the Imperial County line in the east. Home to approximately 655,295 residents, the ethnic/racial makeup of the region is white, Hispanic, Asian, African-American, Native American and Other.

The chart below (Table 9) provides a side-by-side comparison between North Inland region and San Diego County by household size, income, household and ethnic background. Appendix B (Asset Maps), provides a graphical representation of the distribution of low income-families and resources in the North Inland Region.

Table 9. Population and Housing Estimates North Central vs. Countywide (SANDAG, CURRENT ESTIMATES (2006))	North Inland Region	SD County
Population	655,295	3,051,280
Average Household Size	2.71	2.77
Median Income (not adjusted for inflation)	\$51,108	\$47,955
Ethnic Background		
Hispanic	35%	30%
White	55%	50%
Black	2%	5%
American Indian	1%	<1%
Asian	5%	10%
Other	2%	2%

vi. South Region

The South Region of the County serves the residents of National City, Chula Vista, Imperial Beach and Coronado and the communities of Bonita, Lincoln Acres, Sunnyside, Nestor, Otay Mesa, Palm City and San Ysidro. The region is bordered by the Pacific Ocean to the west; Mexico to the south; the Otay Mountains to the east; and the City of San Diego to the north. The predominance of Hispanics in the South Region is anticipated to continue increasing through 2020, when the estimated ethnic composition will be around 59% Hispanic. The number one employment industry in the South Region is services, followed by retail trade and government.

The 2000 Census reported that the average household size for San Diego County was 2.77, while the South Region was 3.02. The incidence of poverty in San Diego County is 11%, while in South Region the poverty level stands at 15%. The attached map reflects the number and percent of families living in poverty in the South Region as well as the resources available to these families and the distance (in miles) that they have to travel to reach these services.

The chart below (Table 10) provides a side-by-side comparison between South region and San Diego County by household size, income, household and ethnic background. Appendix B (Asset Maps) provides a graphical representation of the distribution of low income-families and resources in the South Region.

Table 10. Population and Housing Estimates (SANDAG, Current Estimates (2006))	South Region	SD County
Population	271,448	3,051,280
Average Household Size	3.02	2.77
Median Income (not adjusted for inflation)	\$65,443	\$47,955
Ethnic Background		
Hispanic	52%	30%
White	27%	50%
Black	6%	5%
American Indian	.3%	<1%
Asian	13%	10%
Other	2%	2%

D. SAN DIEGO – CAP LINKAGES WITH SERVICE NETWORKS

Currently the Community Action Partnership (CAP) contracts with community-based agencies to provide Family Self-Sufficiency services to low-income families. In addition, CAP leverages resources through partnership efforts and Memorandums of Agreement with other community based agencies and organizations and County Departments and programs that provide services such as: Child Welfare Services' Community Services for Families (CSF) contracts, Earned Income Tax Credit (EITC), Homeless Services, Juvenile Diversion, Domestic Violence, after school programs, Child Safety programs, 2-1-1 (information and referral hotline), Aging and Independent Services, Public Health, etc. In addition, CAP interfaces with the County's CalWORKS, Medi-Cal and Food Stamps programs to provide wrap around services for families in need. San Diego CAP continues to build upon the on-going efforts within HHSA and their committed partners to improve access to food, nutrition, employment assistance and shelters.

CAP has a Community Strategies and Initiatives (CSI) section whose primary function is to develop and enhance working relationships countywide. CSI works closely with both internal and external partners as well as a variety of community collaborative groups. CAP utilizes the collaborative networks to gather input and to disseminate information to community groups and residents advocating for services in their own communities.

2. NEEDS ASSESSMENT

A. METHODOLOGY

San Diego Community Action Partnership (CAP) Needs Assessment included review and analysis of data from a variety of sources such as State and local census data, public hearings, labor market reports, economic conditions and job growth.

This comprehensive approach ensured that the needs assessment process more accurately reflects the current priorities of the low-income populations in the San Diego service area. The results of the needs assessment prioritizes and supports the services and activities identified in this plan. The services are aligned with the National Performance Indicators.

The Public Hearings utilized a survey tool that was developed in consultation with local government faith and community based leaders and provider agency staff committed to increasing self-sufficiency and with agreement from the Community Action Board. Details of the process used for the Hearings are provided in Requirement 5.

In addition to the testimony from the public hearings, a local advocacy group attended the March and April 2009 Community Action Board meetings and provided a presentation and testimony on a research participatory project they are working on titled "Hunger Amidst Plenty". This project includes a survey conducted with 187 community members and gauges their ability to access Food Stamp benefits from the County. The input and testimony from the group and preliminary results from their study are incorporated in the public hearing detail section of requirement 5 of the CAP.

B. IDENTIFICATION OF PRIORITY SERVICE AREAS

The Community Profile clearly indicates that San Diego is an area that is significantly impacted by poverty. The economic downturn devastating the nation continues to exact a severe toll on the local economy with low-income families being heavily impacted. As of February 2009, San Diego's unemployment rate revised average was 8.6% and it is likely to get worse.

While housing prices continue to fall, the numbers of homeless families are steadily increasing. Clearly, these trends indicate the need for assistance with employment and housing/homeless services. The identification of these high priority needs is confirmed by results from the public hearings and surveys. Another area identified from the public hearings is the need to modify the social service network so as to be more responsive to the needs of customers. Information obtained in this regard applies to both the County's own services and those provided by community based organizations.

C. PUBLIC HEARINGS SUMMARY

The Community Action Partnership conducted a series of Public Hearings between October 2008 and February 2009 to assess community priorities and needs within the context of the National Performance Indicators (NPIs) and County strategic initiatives. CAP with agreement and approval from its Community Action Board developed a survey tool that was designed to determine the priority areas of service needs in the community.

The surveys were comprised of 16 questions including one open-ended one under the heading of "Other Comments" which provided respondents with the opportunity to provide any information or suggestions that was included in the rest of the survey. These comments along with the proposed resolution are listed on Requirement 5 - Summary of Testimony Received.

D. SURVEY RESULTS

i. Key Findings

The results of the public hearings and survey tools, including the on-line surveys, confirmed that customers in San Diego see the following as priority areas:

- Assistance with Employment;
 - Finding and keeping a job and promoting within their job or to a different job.
 - Finding a job - Respondents expressed a preference for four specific types of assistance – transportation assistance, job search workshops, individual assistance, and employment supports (paying for employment related expenses).
 - Transportation assistance and employment supports were also the most favored forms of assistance for keeping a job.
- Assistance with accessing housing/homeless services;
- Focus on service provision – these comments centered on the way services are provided and the perceived gaps in coverage. They included, for instance, outreach or more specifically informing recipients of where services are.

ii. Other Highlights

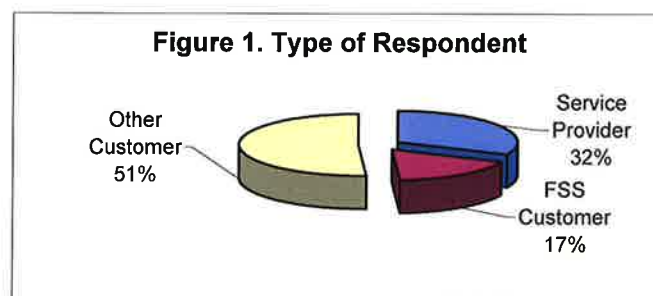
Other key items that emerged were:

- Need for assistance with obtaining health insurance;
- Need for assistance (financial) with avoiding foreclosure; and
- 75% customers who took the survey were unemployed
- 61% of respondents indicated that they were not aware of the county's tax assistance services.
- 15% of customers noted that they had been hungry 6 or more times during the past 6 months indicating the need for food and nutrition assistance.

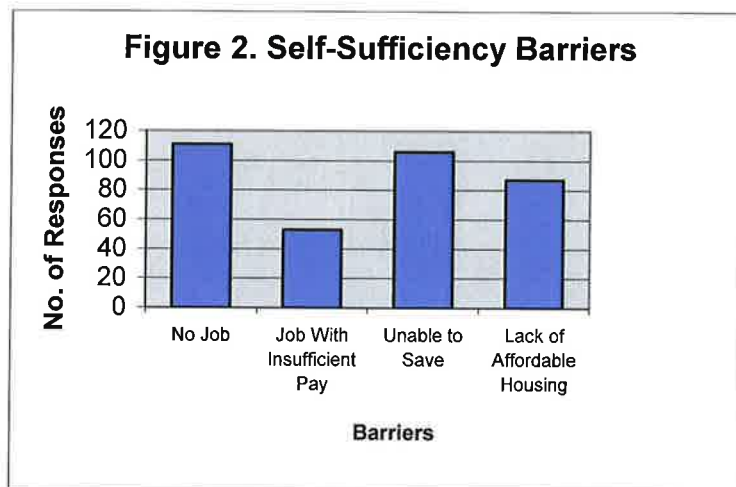
iii. Specific Survey Responses

The results displayed below represent answers to each of the questions which were completed by 174 participants (service providers and customers):

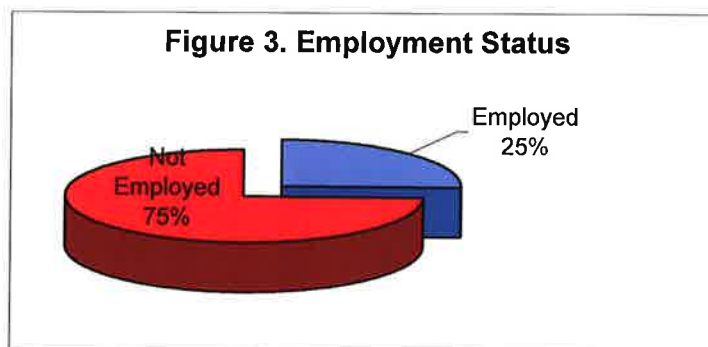
1. Type of Respondent - 68% of persons who completed surveys at the public hearings were service customers (including participants in CAP's FSS program). See Figure 1 below.



2. **Barriers to Self-Sufficiency** - Respondents were asked to list the items they considered to be barriers to self-sufficiency. There were four options listed and participants could select more than one item as a barrier. Therefore, the number of responses exceeds the number of persons who answered this question. See Figure 2 below.



3. **Customer Employment Status** - Customers (This was a customer only question) were asked to list their employment status. Figure 3 shows the percentage of those who were unemployed. It is noteworthy that the great majority (75%) were unemployed. See Figure 3 below.



4. Help with Getting a Job - Respondents were asked about the types of assistance they would need in obtaining a job. Providers were instructed to draw upon their experience about what types of assistance their clients would want and respond accordingly. Participants had ten (10) categories they ranked individually in terms of importance on a scale ranging from 1 (strongly disagree) to 5 (strongly disagree).

The results were tabulated and plotted using a standardized scale to reflect the importance of each category of assistance (e.g., job search classes and individualized assistance for finding employment). See Figure 4 below.

Figure 4: Help Getting A Job - Requested Priority of Assistance Categories						
Category of Assistance	Lowest Priority	Low Priority	Med Priority	High Priority	Highest Priority	Response Count
English Lang Training	38.9%	6.9%	12.2%	9.2%	32.8%	131
	51	9	16	12	43	
Transportation Assistance	14.1%	3.0%	10.4%	20.7%	51.9%	135
	19	4	14	28	70	
Childcare Assistance	31.0%	5.4%	12.4%	10.1%	41.1%	129
	40	7	16	13	53	
Healthcare Assistance	19.2%	8.5%	25.4%	20.0%	26.9%	130
	25	11	33	26	35	
Job Search Workshops	10.2%	3.9%	18.9%	29.9%	37.0%	127
	13	5	24	38	47	
Individual Job Search Assist	11.8%	3.9%	11.8%	29.1%	43.3%	127
	15	5	15	37	55	
Employ Supports -Assist with Expenses	11.3%	3.0%	15.0%	27.1%	43.6%	133
	15	4	20	36	58	
Counseling	23.5%	12.1%	31.1%	12.1%	21.2%	132
	31	16	41	16	28	
Literacy Training	25.4%	8.5%	21.5%	19.2%	25.4%	130
	33	11	28	25	33	
Other (Please state)	32.3%	12.9%	9.7%	6.5%	38.7%	31
	10	4	3	2	12	

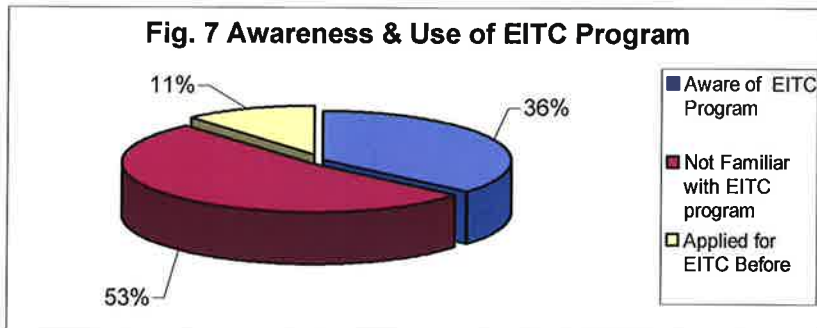
5. Help with Keeping a Job - Respondents were asked about the types of assistance they would need in retaining a job. As with the previous question, providers were instructed to draw upon their experience about what types of assistance their clients would need to keep a job and respond accordingly. The ten (10) categories that participants ranked individually were highly similar to the categories of assistance in finding a job and results were tabulated and plotted as before. See Figure 5 below.

Figure 5: Help Keeping A Job - Requested Priority of Assistance Categories						
Category of Assistance	Lowest Priority	Low Priority	Med Priority	High Priority	Highest Priority	Response Count
English Lang Training	28.9% 43	3.4% 5	15.4% 23	10.7% 16	41.6% 62	149
Transportation Assistance	12.4% 19	3.3% 5	9.2% 14	17.0% 26	58.2% 89	153
Childcare Assistance	22.0% 31	2.1% 3	9.9% 14	12.8% 18	53.2% 75	141
Healthcare Assistance	15.2% 22	2.8% 4	22.8% 33	17.2% 25	42.1% 61	145
Employ Workshops	13.4% 19	6.3% 9	22.5% 32	14.1% 20	43.7% 62	142
Individ Assist	14.3% 20	3.6% 5	19.3% 27	24.3% 34	38.6% 54	140
Assist W Expenses	8.3% 12	4.1% 6	13.8% 20	22.8% 33	51.0% 74	145
Counseling	21.8% 31	5.6% 8	26.8% 38	14.8% 21	31.0% 44	142
Literacy Training	25.9% 35	3.7% 5	17.8% 24	18.5% 25	34.1% 46	135
Other	34.1% 15	2.3% 1	9.1% 4	6.8% 3	47.7% 21	44

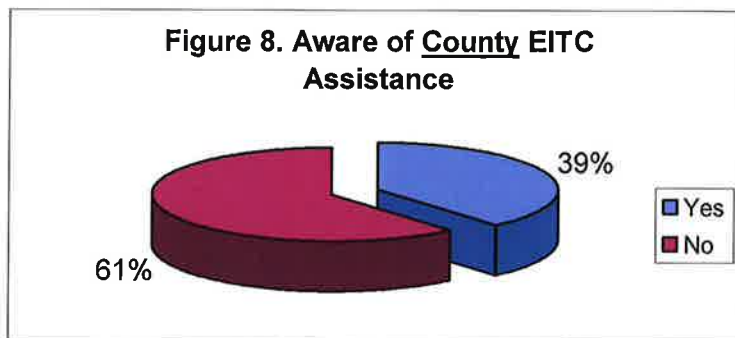
6. Assistance with Promotion on the Job - Respondents were asked to individually rank the importance of five (5) types of assistance with job promotion. See Figure 6 below.

Figure 6: Help With Job Promotion - Requested Priority of Assistance Categories						
Category of Assistance	Lowest Priority	Low Priority	Med Priority	High Priority	Highest Priority	Response Count
Skills training	9.8% 15	0.7% 1	5.9% 9	18.3% 28	65.4% 100	153
Assistance with negotiation	9.9% 15	2.6% 4	11.8% 18	25.7% 39	50.0% 76	152
Additional Skills on the Job	8.6% 13	0.7% 1	7.2% 11	23.7% 36	59.9% 91	152
Individualized assistance	10.5% 16	3.9% 6	12.4% 19	19.0% 29	54.2% 83	153
Other	17.2% 5	0.0% 0	13.8% 4	3.4% 1	65.5% 19	29

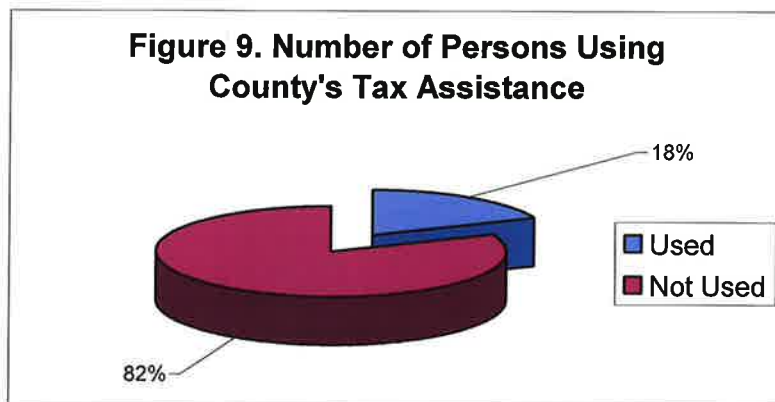
7. **Awareness of the federal Earned Income Tax (EITC) program (Customers only)** - This question was designed to gauge the level of awareness of the EITC program – a tax credit for working low-income families and an effective anti-poverty strategy. See Figure 7 below.



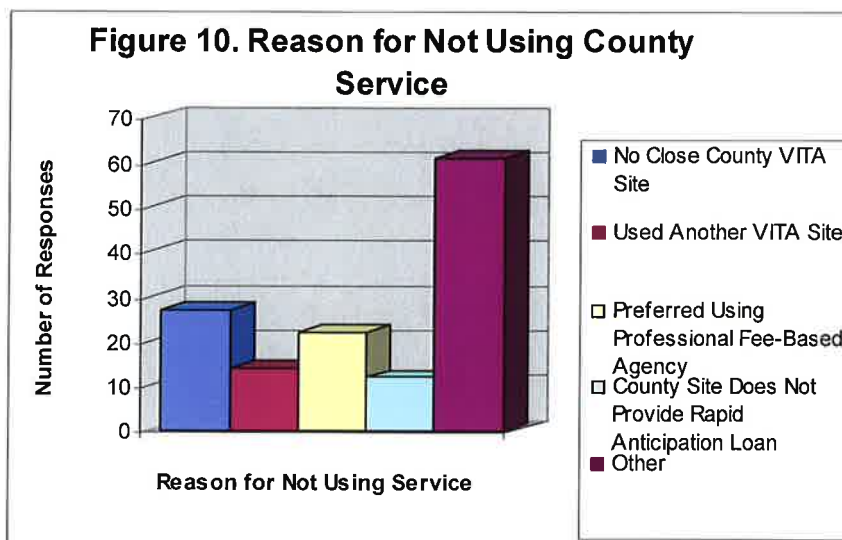
8. **Awareness of the County's EITC tax assistance program** - This question is closely related to the previous one but was designed to gauge whether survey respondents are aware that the County, in partnership with local community based agencies provides free tax assistance with an emphasis on identifying and assisting with claiming the EITC credit. See Figure 8 below.



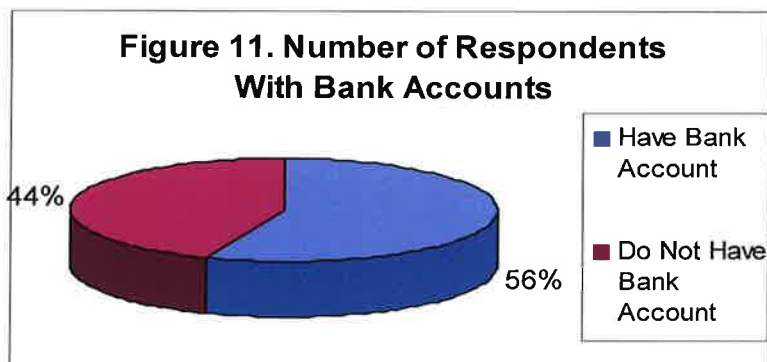
9. **For customers who answered that they were aware of the County tax services, we asked if they had used these services** - It is probable that customers did not fully understand the question because all customers apparently answered the question including those who said they were unaware of the services.



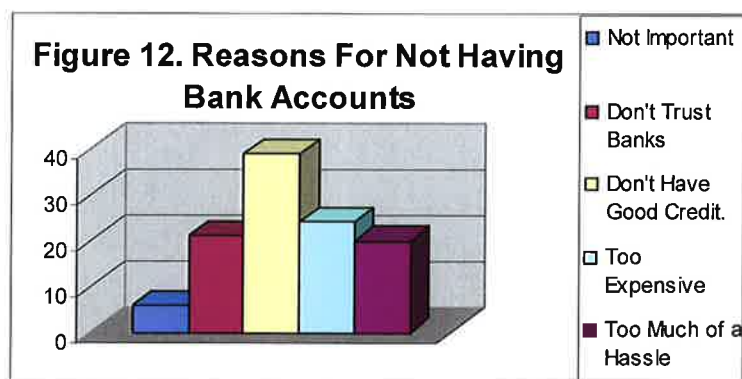
10. **Reason for not Using County Service** - For those who did not utilize the County's service we asked the reason for not using. See Figure 10 below.



11. **Percentage of Individuals with Bank Accounts.** See Figure 11 below.



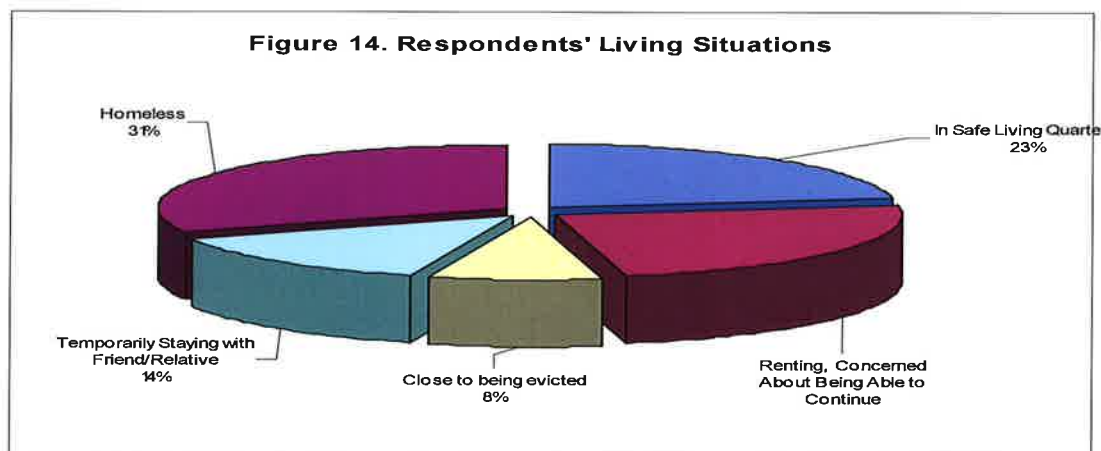
12. **Reasons for not having Bank Accounts** - We asked those who did not have bank accounts their reasons for not having accounts. Figure 12 below graphically shows these reasons.



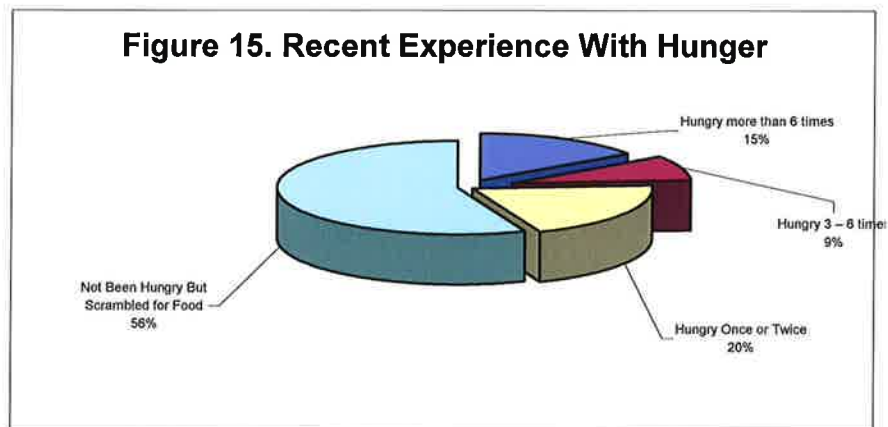
13. **Money Management** - This question assesses the need for different types of financial literacy services. Figure 13 shows that respondents ranked most of the options equally in terms of importance to managing their money.

Figure 13: Help With Money Management - Requested Priority of Assistance Categories						
Category of Assistance	Lowest Priority	Low Priority	Med Priority	High Priority	Highest Priority	Response Count
Understanding how to do a household budget	9.0% 14	1.9% 3	12.3% 19	21.3% 33	55.5% 86	155
Understanding credit scores	9.0% 14	5.2% 8	18.7% 29	15.5% 24	51.6% 80	155
Guidance with increasing my credit score	7.2% 11	2.6% 4	15.8% 24	19.1% 29	55.3% 84	152
Assistance with opening a low (or no) fee bank account	9.9% 15	4.6% 7	15.9% 24	21.2% 32	48.3% 73	151
Assistance with maintaining a bank account.	12.1% 18	4.0% 6	20.8% 31	17.4% 26	45.6% 68	149
Money saving tips to deal with daily living expenses	7.1% 11	2.6% 4	11.0% 17	22.6% 35	56.8% 88	155
Information on loans and grants for higher education	8.4% 13	1.3% 2	13.5% 21	18.7% 29	58.1% 90	155
Other	12.1% 4	0.0% 0	15.2% 5	0.0% 0	72.7% 24	33

14. **Living Situation (Customers Only).** Figure 14 below shows the various living situations of the survey respondents.



15. **Frequency of Hunger (Customers only).** Asked to determine how often in the past 6 months customers had experienced hunger. See Figure 15 below.



16. **This was an open-ended question designed to provide respondents with an opportunity to comment on anything related to needs or services for low-income persons** - The question was: Is there anything else you would like to add about what needs you may have and/or how we can provide services that would benefit you more? (Use back of page if you need more space.)

The comments received for this question were numerous and covered a wide variety of issues. Here too, certain themes emerged (See Table on the next page below). The three top categories of responses were more or less equal in frequency. They were Employment Assistance, Housing Assistance and Social Services. Together they constituted almost two-thirds of the total (62.4%) number of responses.

Comment	Defintion/Explanation	# of Times	Percent
Employment Assistance	Refers to all comments which address the need for any type of employemnt assistance and includes assistance with microenterprise efforts.	34	20.2%
English Language Training	Includes any mention of English language assistance - for employment or other reason	1	0.6%
Employment training	Vocational training	5	3.0%
Assistance with Food	Provision of food or help in obtaining food such as assistance with applying for food .	8	4.8%
Financial Assistance	Assistance with finances for housing, food, or any other item.	6	3.6%
Financial Literacy	Assistance with budgeting, banking, improving fiscal acument.	5	3.0%
General Education Assistance	Any assistance with obtaining adult education - includes, for example, help with purchasing books, assistance with accessing schools, etc.	6	3.6%
Housing Assistance		35	20.8%
Health Care/Health Insurance	Assistance with obtaining insurance and/or help with medical appointments, etc.	6	3.6%
Homeless Services		3	1.8%
Legal Assistance		7	4.2%
Mental Health Counseling		2	1.2%
Other	Anything not included in the other 15 categories listed here.	6	3.6%
Public Assistance Access	Help with accessing public assistance (such as CalWORKs) benefits. This includes comments about County social service delivery.	4	2.4%
Social Services	Help with accessing social services - includes comments about service delivery (but not including public assistance access)	36	21.4%
Transportation	Any assistance with obtaining trasnportation for employment, school, or medical care and help with obtaining driver's licences.	4	2.4%
Total Number of Comments		168	100.0%

E. RESOLUTION/RESPONSE TO IDENTIFIED NEEDS AND COMMENTS

The four major areas that were identified are:

- Employment and Employment Supports;
- Housing and Shelter;
- Emergency Food Assistance; and
- Improved coordination/access to support services

Each of these areas is addressed below:

Employment and Employment Supports: San Diego Community Action Partnership (CAP) will continue to provide employment services and related supports as identified in the National Performance Indicators (CSD 801) through its Family Self-Sufficiency contracts. The specific strategies involved in assisting low-income families obtain jobs is described in Appendix A, CSBG NPI Programs Report.

Housing and Shelter: CAP will continue provide housing through the Rotational Shelter and the Winter Shelter programs utilizing its partnership with 2-1-1 for point of entry/referral process. Specific strategies, along with projected target numbers are detailed in Appendix A, CSBG NPI Programs Report.

Emergency and Food Assistance: CAP currently provides emergency food packets through its Family Self-Sufficiency (FSS) contracts. In addition, contracted agencies maintain a working relationship with the local Food Banks to maintain pantries from which they can further assist their clients and or have access to other community food resources. CAP serves on the local Emergency Food and Shelter Program board which through FEMA funds congregate and supplemental food county-wide. Low-income families accessing FSS services are automatically referred to apply for the Supplemental Nutrition Assistance Program (SNAP) to ensure on-going food resources for their families.

Improved Coordination/Access to Support Services: Concerns raised by community member testimony related to both the county and the private social service network continues to be part of multiple strategies that are underway both by the Health and Human Services Agency (HHSA) as it relates to the Supplemental Food and Nutrition Program (SNAP) and CAP for concerns related to other program access. The San Diego County Board of Supervisors (BOS) requested, among other things, development of a plan to increase SNAP participation. In response to this request HHSA has developed a Nutrition Security Plan (NSP) that was approved by BOS on April 21, 2009 and includes strategies to address many, if not all of the community concerns raised during public hearings. The testimony provided by members of the community related to accessing the SNAP program has been shared with HHSA staff and it is also incorporated as part of this plan. While SNAP and eligibility is not under CAP's purview, it is an important component to help resolve our mission with regard to poverty and hunger and CAP will continue to follow closely the resolution of these concerns.

CAP's Community Strategies and Initiatives (CSI) will continue to work with the FSS contracted agencies and through community partnerships and coalitions, including 2-1-1 to leverage, strengthen and build capacity to address and resolve service delivery issues.

3. OTHER DATA AND SERVICES AVAILABLE TO LOW-INCOME FAMILIES

The Center on Policy Initiatives released a report in 2008 revealing that incomes stagnated in San Diego County in 2007 while buying power of worker's earnings dropped. The report reveals that more than 320,000 San Diego County residents lived in dire poverty including 145,000 working poor and 110,000 children. Current poverty levels for San Diego County stand at 12.3% which shows an increase from 11% in 2006. In some areas of the County poverty rates are as high as 20.6%. In addition, Deborah Reed, author of "Poverty in California: Moving Beyond the Federal Measure", indicates that San Diego County's adjusted poverty rate is 17%. Utilizing this perspective provides the Community Action Partnership and other social service providers a more realistic indication of how many San Diegans are poor, who they are, and where they live.

There are a high number of poor children in San Diego as there are in the rest of California. A recent study cited by The Sacramento Bee highlighted the status of California's children as compared to children elsewhere in the nation. The chances of a child becoming a financially successful adult are better in 30 other states than in California. The thrust of the study is that children in California are not receiving the necessary education to become self-sufficient. San Diego CAP helps address this issue with innovative programs like the School-Based Self-Sufficiency services offered at O'Farrell Middle School (See NPI 6.3).

While 2-1-1 San Diego indicates that there are more than 2000 social service agencies providing more than 3500 social service programs in San Diego County, the reality is that more families with children and individuals are living in poverty today. Additionally, with the current economy, high unemployment rates and low-wages for those employed, there is a high number of San Diego County families who are living below the federal poverty level.

The Community Action Partnership establishes its priorities through the integration of the Health and Human Services Agency initiatives and the priorities established by the community to assist low-income families and individuals to acquire skills and knowledge, increase income, and promote asset building to achieve self-sufficiency.

Through direct services from the Health and Human Services Agency and local faith and community based organizations, both public and private, low income residents are able to access free social services such as social security, Medicare/Medi-Cal, food and nutrition programs, legal assistance, mental health, child care, homeless services, health services, self-sufficiency services, domestic violence assistance, intergenerational services, free tax preparation, subsidized housing, etc. These services include the following activities:

- a. The Health and Human Services Agency offers disabled and indigent individuals assistance with completing applications for Social Security Income (SSI). This SSI Advocacy program also assists applicants with obtaining necessary medical and other supporting information. Another example is CAP's EITC program where customers receive free tax preparation and assistance in claiming the Earned Income Tax Credit (See Appendix A - NPI 1.3 for more information).
- b. The Family Self-Sufficiency program provides clients with assessments that address their most immediate needs and create a work plan to help families move towards self-sufficiency. The assessments include service agreements and services that delineate client responsibilities and program requirements leading to self-sufficiency. Additionally, Family Self-Sufficiency case managers orient clients regarding rights and responsibilities to public assistance programs and/or other community resources.

- c. Families enrolled in the Welfare-to-Work program, through their eligibility in CalWORKs are entitled to receive supportive services that range from bus passes for parents and their children to child care and other services to help them train and seek and obtain jobs. For non-CalWORKs clients and/or homeless families, bus tokens are made available by community based organizations to clients participating in their programs. The Family Self-Sufficiency program also provides customers with employment supports which may include transportation assistance and some form of child care services.
- d. Community based organizations provide an array of outreach activities to community based resources. CAP provides funding for 2-1-1 San Diego, the information and referral service that provides resource information through a call center and through the internet.
- e. Additionally, the Health and Human Services Agency has a Public Assistance Unit that provides San Diego residents with eligibility and community resource information in addition to an most recently inaugurated access center where clients receiving services from HHSA can call and request information on the specific case and/or pending applications.

Requirement 2

2008/2009 STATEWIDE PRIORITY/STRATEGY STATEMENT

Does your Agency accept the Family Self-Sufficiency Statewide Priority? ☒ Yes No

Please include a narrative description of the strategies supporting Family Self-Sufficiency strategies by your agency in the local planning process as required by Government Code Section 12745(e). In this narrative, please provide the agency's definition of Family Self-Sufficiency and the strategy utilized to achieve these priorities.

If your agency rejects the statewide priority, state the reason(s) for your agency's rejection.

CAP San Diego is a public Community Action Agency residing administratively within the County government structure. CAP San Diego promotes its vision and mission as well as that of the County of San Diego through the integration of regional initiatives and priorities that assist low-income families and individuals to acquire skills and knowledge, increase income and promote asset building to achieve self-sufficiency which aligns with the priorities listed in the Government Code Section 1274(e). Furthermore, the 2010-11 CAP Plan utilized the Federal National Performance Indicators to track outcomes and the pay-for-performance methodology to evaluate the effectiveness of contracted services.

Public hearings were held in each of the County of San Diego's geographical service areas. The hearings were held at different times of the day to ensure that consumers were adequately represented. Similarly, a survey was developed and translated to Spanish for the target audiences, service providers and consumers. The surveys were designed to identify and elicit gaps in services and to determine areas of priority. Additionally, this year surveys were posted on-line and they were distributed county-wide through community collaborative distribution lists.

The 2010/2011 Community Action Plan incorporates demographic information unique to the San Diego region and where possible national comparisons are made. Additionally asset maps were developed to further assist in the development of services.

<p style="text-align: center;">Requirement 3 FEDERAL ASSURANCES COATES Human Services Reauthorization Act of 1998: Public Law 105-285</p>
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To the left of Federal Assurances 676(b)(1)(A) and 676(b)(1)(B) please indicate what activities your agency administers by placing a check in the box provided. **Additionally, provide a narrative description of the agency activities for each of the Assurances checked below:**

1. Section

676(b)(1)(A): To support activities that are designed to assist low-income families and individuals, including families and individuals receiving assistance under part A of Title IV of the Social Security Act (42 U.S.C. 601 et seq.), homeless families and individuals, migrant or seasonal farm workers and elderly low-income individuals and families, and a description of how such activities will enable the families and individuals--

- | | |
|--------------------------|---|
| X | i. remove obstacles and solve problems that block the achievement of self-sufficiency, (including self-sufficiency for families and individuals who are attempting to transition off a State program carried out under part A of title IV of the Social Security Act); |
| X | ii. secure and retain meaningful employment; |
| X | iii. attain an adequate education, with particular attention toward improving literacy skills of low-income families in the communities involved, which may include carrying out family literacy initiatives; |
| X | iv. make better use of available income; |
| X | v. obtain and maintain adequate housing and a suitable living environment; |
| X | vi. obtain emergency assistance through loans, grants or other means to meet immediate and urgent family and individual needs; and |
| X | vii. achieve greater participation in the affairs of the communities involved, including the development of public and private grassroots partnerships with local law enforcement agencies, local housing authorities, private foundations, and other public and private partners to: |
| <input type="checkbox"/> | (I) document best practices based on successful grassroots intervention in urban areas, to develop methodologies for widespread replication; and |
| <input type="checkbox"/> | (II) remove obstacles and solve problems that block the achievement of self-sufficiency, (including self-sufficiency for families and individuals who are attempting to transition off a State program carried out under part A of title IV of the Social security Act); |

Federal Assurances (cont.)

2. Section

676(b)(1)(B): to address the needs of youth in low-income communities through youth development programs that support the primary role of the family, give priority to the prevention of youth problems and crime, and promote increased community coordination and collaboration in meeting the needs of youth, and support development and expansion of innovative community-based youth development programs that have demonstrated success in preventing or reducing youth crime, such as:

- X** (i) programs for the establishment of violence-free zones that would involve youth development and intervention models (such as models involving youth mediation, youth mentoring, life skills training, job creation, and entrepreneurship programs); and
- X** (ii) after-school childcare programs; and

3. Section

676(b)(1)(C):

- ☐ To make more effective use of, and to coordinate with, other programs related to the purposes of this subtitle (including State welfare reform efforts).

Provide a narrative description of the agency activities for each of the Assurances listed below:

1. Section

676(b)(4):

Will provide, on an emergency basis, for the provision of such supplies and services, nutritious foods and related services, as may be necessary to counteract conditions of starvation and malnutrition among low-income individuals;

2. Section

676(b)(5):

Entities will coordinate and establish linkages between governmental and other social services programs to assure the effective delivery of such services to low-income individuals and to avoid duplication of such services and a description of how the State and eligible entities will coordinate the provision of employment and training activities, as defined in section 101 of such Act, in the State and in communities with entities providing activities through statewide and local workforce investment system under the Workforce Investment Act of 1998.

3. Section

676(b)(6):

Will ensure coordination between antipoverty programs in each community in the State, and ensure, where appropriate, that the emergency energy crisis intervention programs under title XXVI (relating to low-income home energy assistance) are conducted in such community.

4. Section

676(b)(9):

Entities will to the maximum extent possible, coordinate programs with and form partnerships with other organizations serving low-income residents of the communities and members of the groups served by the State, including religious organizations, charitable groups, and community organizations.

Federal Assurances (cont.)

- 5. Section 676(b)(10):** Each eligible entity to establish procedures under which a low-income individual, community organization, or religious organization, or representative of low-income individuals that considers its organization, or low-income individuals, to be inadequately represented on the board (or other mechanism) of the eligible entity to petition for adequate representation.
- 6. Section 676(b)(12):** All eligible entities will not later than fiscal year 2001, participate in the Results Oriented Management and Accountability System (ROMA), or another performance measure system for which the Secretary facilitated development pursuant to section 678E(b), or an alternative system for measuring performance and results that meets the requirements of that section, and a description of outcome measures to be used to measure eligible entity performance in promoting self-sufficiency, family stability, and community revitalization.
- 7. Section 678D(a)(1)(B):** Ensure that cost and accounting standards of the Office of Management and Budget apply to a recipient of the funds under this subtitle.
- 8. Section 676(b)(3)(A):** Provide a description of the service delivery system, for services provided or coordinated with funds made available through grants under section 675C(a), targeted to low-income individuals and families in communities within the State.
- 9. Section 676(b)(3)(B):** Provide a description of how linkages will be developed to fill identified gaps in the services, through the provision of information, referrals, case management, and follow-up consultations.
- 10. Section 676(b)(3)(C):** Provide a description of how funds made available through grants under section 675C(a) will be coordinated with other public and private resources.
- 11. Section 676(b)(3)(D):** Provide a description of how the local entity will use the funds to support innovative community and neighborhood-based initiatives related to the purposes of this subtitle, which may include fatherhood initiatives and other initiatives with the goal of strengthening families and encouraging effective parenting.

Federal Assurances (CAP Responses)

Section

676 (b)(1)(A)

i. Removing Obstacles and Solving Problems That Block Self-Sufficiency

This will be achieved on two levels: by partnering with community-based organizations to leverage resources for low-income families, and through the Community Action Partnership's Family Self-Sufficiency program that provides case management to the target populations identified in Section 676(b)1(A).

ii. Securing and Retaining Meaningful Employment

This will be achieved through the Community Action Partnership's Family Self-Sufficiency program and by partnering with community-based organizations, training institutions and the local Workforce Investment Act entity to expand training and resources for low-income families and through case management and referrals to employment programs including the County's Welfare-to-Work (CalWORKs) program and the career centers funded by the Workforce Investment Act.

iii. Attaining An Adequate Education

The first step in achieving this objective begins with a comprehensive assessment to determine participants' educational needs. Particular attention will be given to each participant's literacy level. Next through referrals to resources in the community, including adult education centers, and support and guidance by case managers in the Family Self-Sufficiency program, participants will be assisted in progressing to their chosen goals. Case managers, utilizing resources at their disposal, including CalWORKs supportive services, will work towards eliminating any barriers to achieving education.

iv. Making better use of available income

This objective will be met through financial literacy workshops offered in the Family Self-Sufficiency program. Customers will receive training in developing and implementing household budgets, opening and maintaining bank accounts, and taking advantage of available resources. Financial literacy is a major component of the Earned Income Tax Credit campaign that assists low-income families claim the credit.

v. Obtaining and maintaining adequate housing and a suitable living environment

The cost of housing in San Diego has leveled off in recent months. However, despite this stabilization of costs, San Diego remains one of the most expensive housing markets in the nation. The region lacks sufficient affordable housing and sufficient shelters for homeless individuals and families, domestic violence victims, and runaway youth.

Homeless issues will be addressed through CAP's Family Self-Sufficiency (FSS) program funded with CSBG dollars and the Shelter Voucher Program. FSS providers will address homelessness as part of their Family Development case management strategy, which includes an assessment for families' risk status in the area of shelter and assistance with obtaining affordable housing. The Shelter Voucher Program is a collaboration between cities and the County to provide hotel/motel vouchers, case management, food, and transportation services primarily to homeless families with minor children, seniors and persons with disabilities. Services are provided year round through coordination with FEMA services (See Section 676 (b) 5), as a supplement to existing shelter facilities. Case management services are designed to enable the movement of families into transitional and permanent housing by removing barriers and providing appropriate resources.

vi. Obtaining emergency assistance through loans, grants or other means to meet immediate and urgent family and individual needs

Basic needs such as food and shelter will be met through the Family Self-Sufficiency (FSS) program. FSS providers obtain food supplies from the San Diego Food Bank, pantries operated by other community based organizations, churches and surplus food from local grocery stores. Emergency shelter needs are addressed in paragraph V. above. FSS providers link with the County's Health and Human Services Agency Family Resource Centers to assist customers in obtaining cash assistance, food stamps and medical coverage. In addition, FSS providers work with a variety of community-based and faith-based organizations to link customers to all available resources.

vii. Achieving greater participation in the affairs of the communities involved, including the development of public and private grassroots partnerships with local law enforcement agencies, local housing authorities, private foundations, and other public and private partners.

viii. CAP will continue to develop service partnerships to address CAP's vision and mission of eliminating poverty. Over the past two years, CAP San Diego has developed private/public partnerships that assist low-income families and individuals. An example is the partnership developed with San Diego Rady's Children's Hospital. The partnership which began with the distribution of child safety seats resulted in a comprehensive child injury prevention program.

Also, CAP San Diego is working to develop capacity among the grassroots agencies providing services to refugee communities by partnering with the San Diego Refugee Forum (an association of refugee service providers and community members) to pursue funding opportunities. In addition, CAP San Diego is facilitating access for refugees to the county's mainstream resources.

Additionally, CAP staff partner with key regional staff and community stakeholders in each of the six service regions, to support regional collaboratives/initiatives that align with anti-poverty strategies for family stability and self-sufficiency. The focus is on the multiple service needs of low-income families/individuals, identifying and developing common threads between regional operations and CAP initiatives, and emphasizing interactive relationships across agency (formal/informal) to problem solve service issues.

1. Section 676(b)(1)(B): Addressing the needs of youth in low-income communities through youth development programs that support the primary role of the family

While the Community Action Partnership addresses these needs in a multitude of ways, there are three specific programs in which the agency engages youth and promotes youth development. These are:

School-Based, Self-Sufficiency Services. These are services for middle-school children, which are provided by a community-based social service agency working in close coordination with school staff and the community in a charter school. Services include gang intervention, crisis intervention, positive parenting, conflict resolution, cross-cultural development; drug abuse prevention; mentoring children of incarcerated parents and self-esteem development.

Juvenile Diversion Services. This program is designed to reduce the incidence of juvenile crime among at-risk and high risk youth to prevent entry or re-entry into the juvenile justice system. The service target population includes youth from 12 to 17 years of age and included the following activities: Skills Building; Community Service; and Academic Assistance.

2. Section 676(b)(1)(C): Making effective use and coordinating with other related programs

The Health and Human Services Agency in addition to housing the Community Action Partnership also administers the CalWORKs (TANF) program and other public assistance programs. The Agency continues to integrate services through collaboration with a broad range of community organizations to avoid unnecessary duplication. CAP supports and expands this service coordination by partnering with community agencies and also requiring subcontractors to establish collaborative relationships with other agencies serving the same population. As noted in Section 1. ii (Securing Meaningful Employment), CAP also coordinates activities with the local Workforce Investment Act agency – the San Diego Workforce Partnership, at both the administrative level and through the one-stop shops.

1. Section 676(b)(4): Providing emergency supplies

Emergency needs will be met by the Community Action Network as noted in 1- vi. (Section 676(b)(1)(A)).

2. Section 676(b)(5) Coordinating and establishing linkages between governmental and other social services programs

In each of the six geographic service regions, an assigned CAP liaison partners with key regional staff and community stakeholders to support regional collaboratives/initiatives that align with anti-poverty strategies for family stability and self-sufficiency. The goal is to identify and leverage opportunities and resources wherever possible with community partners.

Additionally, the County Health and Human Services Agency has an ongoing and working relationship with the San Diego Workforce Partnership through its contracted providers that includes review of proposals to operate the Workforce Partnerships Regional Career Centers. CAP has an integral role in the interagency relationship that involves coordination with the Health and Human Services Agency, and the Strategy Planning and Operations Support Division that has the lead role in working with the Workforce Partnership. At the service delivery level, the Family Self-Sufficiency Services program is closely coordinated with Workforce Partnership Career Centers, Refugee Services, and the Children's Initiative. Furthermore, the San Diego Workforce Partnership is a key partner in Earned Income Tax Credit (EITC) program lead by CAP San Diego.

3. Section 676 (b) (6) Ensuring coordination between antipoverty programs

CAP as part of the Health and Human Services Agency, coordinates effectively with the Agency's CalWORKs program. Many participants in the Family Self-Sufficiency program are public assistance recipients, some of whom receive services to resolve issues that have caused them to be sanctioned for non-cooperation in the Welfare-to-Work program. CalWORKs participants who are "timing out" are given priority in the Family Self-Sufficiency program.

As mentioned previously, CAP supports the coordination of anti-poverty programs by partnering with community agencies and requiring subcontractors to establish collaborative relationships with other agencies serving the same population.

4. Section 676(b)(9): Coordinating programs and forming partnerships

CAP values and maintains ongoing collaborative relationships with a wide range of community-based and faith-based organizations and agencies to maximize limited resources for low-income families. For example, CAP has enjoyed a long-standing relationship with the Ecumenical Council of San Diego that operates the Interfaith Shelter Network, a faith-based program that provides shelter to homeless families.

Additionally, CAP partners with the City of San Diego, the County's Housing and Community Development Department as well as homeless service providers to offer emergency shelter during the winter months to homeless families and at-risk individuals.

The Earned Income Tax Credit program is another example of a private/public partnership formed to provide countywide free tax preparation to low-income families that returns millions of dollars to San Diego communities. The partnership includes AARP and the Internal Revenue Service.

5. Section 676(b)(10): Petitioning to be on the Board

The Community Action Board of the County of San Diego is a tripartite body in compliance with the federal statute and the California Government Code. The Board of Supervisors appoints members of the public sector to the Board. The Community Action Board selects members of the economically disadvantaged sector and the private sector. When vacancies occur, the Nominating Committee of the Board publicizes vacancies with the assistance of collaborative networks, community-based organizations and the Health and Human Services Agency. All individuals seeking membership in the economically disadvantaged sector, and organizations seeking representation in the private sector of the Board, are accepted for consideration as long as there is no potential conflict of interest. However, persons seeking to represent the low-income population must demonstrate a close connection with the population and the ability to represent the interests of the economically disadvantaged.

Individuals, groups, or organizations can submit a letter to the Chairperson of the Community Action Board petitioning for membership. The CAP Nominating Committee reviews and considers the petition. This assures that the Community Action Board will continue to be inclusive and focus on the needs of economically disadvantaged persons.

6. Section 676(b)(12): Participation in ROMA

The County of San Diego has moved the measurement of process objectives to actual outcome objectives. Board Policy A-119 (Outcome Based Measures for Health and Social Services Contracts), requires results-based measurement of performance.

The County of San Diego utilizes the National Performance Indicators which are outcome based goals. These NPI measures are operationalized in CAP's contracts with the FSS providers. Additionally, the contract payment methodology is pay-for-performance.

7. Section 678D(a)(1)(B)

The County of San Diego adheres to the highest standards of fiscal accountability, and fully complies with the standards of the Office of Management and Budget. The Community Action Partnership adheres to these standards and all State and locally prescribed by federal and state regulations in the administration of Community Service Block Grant funds and other programs in its purview. CAP subcontractors are held to these standards as well. With the transition to pay for performance contracting, contractor claims are based on pay points achieved. These pay points are validated through random inspection.

The County's Auditor and Controller ensures that the financial transactions of all County departments, offices and other subdivisions of the County are in conformance with generally accepted accounting principles and requirements prescribed by the State Controller and that they are adequate to record:

- a. All budgeted revenue and appropriations, together with additions or transfers thereto and expenditures or transfers there from;
- b. All amounts or unexpended appropriations which have been legally encumbered, and the unencumbered, unexpended balances of such appropriations;
- c. All revenues accrued and liabilities incurred;
- d. All cash receipts and disbursements;
- e. All transactions affecting the custody or disposition of County assets.

8. Section 676(b)(3)(A): Service Delivery

Recognizing that both societal and individual factors play a role in poverty, CAP's service delivery strategy focuses on providing opportunities for families, and building/enhancing community capacity to address systemic causes of poverty and promote healthy, self-sufficient communities. The Earned Income Tax Credit program serves as a prime example of this two-tiered service delivery structure and is detailed below, under both the family and the community levels to illustrate how this strategy work is implemented.

The family level: The Family Self-Sufficiency program helps families and individuals resolve barriers to self-sufficiency. This program utilizes the Family Development model that emphasizes family strengths rather than deficits in the identification and elimination of barriers to self-sufficiency and is designed to adjust service strategies to large variations in family needs. The principal methodology is assessment, planning, consultation, and referrals, with the families viewed as service partners.

Families are also assisted with asset development through the Earned Income Tax Credit campaign. This highly successful campaign was further enhanced with the renewed emphasis on financial literacy services and asset building programs such as working with families to learn about and become involved with banking institutions with the goal that this will lead to Individual Development Accounts (IDAs) and asset accumulation.

The community or macro level: At this level, community capacity is enhanced through developing close partnerships with community agencies. CAP's Community Strategies and Initiatives (CSI) unit was formed for the express purpose of serving as a link to the community and transform into action the Community Action vision of changing peoples' lives and improving the communities of San Diego. Community liaisons partner with key regional staff and community stakeholders to support regional collaboratives/initiatives that align with anti-poverty strategies that support family stability and self-sufficiency.

The focus is on the multiple service needs of low-income families/individuals, identifying and developing common threads between regional operations and CAP initiatives, and emphasizing interactive relationships across agencies (formal/informal) to problem solve service issues. Additional details of this strategy are provided in CSD 801 (NPI 4.1.).

Service delivery in the County of San Diego's Family Self-Sufficiency Services program is regionalized in accordance with the County's Health and Human Services Agency's practice of making health and social services more accessible. Family Self-Sufficiency Services are provided in each of six geographic service delivery regions county-wide.

Specific services consist of:

- Free tax preparation and EITC assistance for low-income families;
- Financial literacy services and asset building and asset protection programs (including the formation of Individual Development Accounts;
- Access to health insurance, food stamps and other public assistance programs;
- Emergency assistance and crisis intervention;
- Family Self-Sufficiency services focused on family strengths;
- Injury prevention, including child safety seats;
- Homeless services; and
- Services to at-risk youth (at-risk for entry into the juvenile justice system).

9. Section 676(b)(3)(B), Linkages to Fill Identified Gaps.

Linkages will be developed and strengthened at both the organizational level and at the direct service level. At the organizational level, linkages will occur at the executive level between CAP San Diego and other organizations in the community that serve low-income families. One example of such linkages is in the area of employment and training where CAP will engage with the Workforce Partnership (the region's Workforce Investment Act governance organization) to reinforce the existing collaboration and develop mutually beneficial activities to employ low-income families.

At the direct service level, CAP's Family Self-Sufficiency (FSS) providers (community-based agencies operating under contracts) will implement collaboration in all six service regions of the County, by working closely with each WIA career centers. FSS providers tap additional resources available through the CalWORKS employment services network for the families they serve who receive public assistance. In addition, FSS providers are tasked with developing close working relationships with the Health and Human Services Agency's Family Resource Centers in each of the six service regions. These relationships are formalized through Memorandums of Agreement.

Finally, public-private partnerships form the basis of the Earned Income Tax Credit campaign. Each year the goals and objectives of this program are met through a network of public and private agencies. Linkages are established and enhanced throughout the year with leadership provided by CAP San Diego.

10. Section 676(b) (3) (C): Available Funds through Grants

CAP San Diego actively seeks to develop new funding sources and leverage CSBG funds to expand resources available for program operations. In keeping with federal guidelines under this section, CAP has demonstrated an ability to identify and leverage existing community resources to ensure that program participants receive comprehensive services. Service providers are required to operate within networks and collaborative relationships, which facilitate an integrated service delivery system for low-income families and individuals.

CAP San Diego engages in functional threading, both internally and externally, and coordination by involving and bringing together County programs and departments and community agencies in the support of County strategic initiatives such as: Kids, Safe and Livable Communities and the EITC campaign.

In the current 2009 and ongoing, FSS contracts will require providers to distribute Food Stamp information and provide referrals. FSS providers will prioritize service delivery to CalWORKs "timed out" individuals and will strengthen links between FSS providers and Agency, Family Resource Centers (FRCs). In addition, CAP San Diego has approached San Diego Gas & Electric (SDG&E) to provide information regarding their energy assistance programs through the FSS program.

Funding is also coordinated through funding partnerships. For example, San Diego Unified School District funds are used to supplement Community Services Block Grant funds to operate an on-campus self-sufficiency program for middle school students and their families in an economically disadvantaged community of San Diego. Also, funding from the City of San Diego and the County of San Diego's Housing and Community Development is used to augment Community Services Block Grant revenue to operate homeless programs.

It is the policy of the County's Health and Human Services Agency to strengthen service coordination by involving staff from all relevant programs and geographic service delivery regions during the development of any program plan. CAP San Diego contacted regional staff to identify key collaboratives to include in the public hearings.

11. Section 676(b)(3)(D): Use of Local Entity Funds to Support Innovative Community and Neighborhood-base Initiatives

As mentioned previously, CAP San Diego has developed many private-public partnerships that assist low-income families and individuals. Two highly successful partnerships have been with local hospitals, San Diego Rady Children's Hospital and Scripps Hospital. The partnership with Rady Children's Hospital resulted in the development and implementation of a comprehensive child injury prevention program that was recognized by the National Association of Counties (NACo) as a best practice. The partnership with Scripps Hospital resulted in the development of the *Healthy Youth, Healthy Futures Program* that promotes health careers to low-income youth by offering mentoring and job shadowing. The program began with middle school youth and has now expanded to refugee youth and youth attending juvenile court schools.

The school-based Self-Sufficiency program at O'Farrell Middle School places equal emphasis on the social, intellectual, psychological, and physical needs of their students, and offers self-sufficiency services at the Middle School campus for the students of O'Farrell and their families. The on-site support provided by the school's Family Support Services team of social workers offers a range of services, including intervention programs and conflict management sessions.

Requirement 4
STATE ASSURANCES
California Government Code

Provide a narrative description of the Assurances listed below:

1. Section

12730(h):

Eligible beneficiaries are the following: (1) all individuals living in households whose income is at or below official poverty income guidelines as defined by the United States Office of Management and Budget; (2) All individuals eligible to receive Temporary Assistance to Needy Families or Federal Supplemental Security Income benefits, and (3) Residents of a target area or members of a target group having a measurably high incidence of poverty and which is the specific focus of a project financed under this chapter.

CAP San Diego's FSS providers determine a client's eligibility for CSBG services in accordance with Government Code Section 12730 prior to service delivery. Other services that are delivered under the CAP San Diego umbrella are provided in accordance with funding eligibility requirements.

2. Section

12747 (a)

Contingency planning for reduced federal funding: Provide your agency's contingency plan for reduced federal funding. Also, include a description of how your agency will be impacted in the event of reduced CSBG funding.

The Community Action Partnership is fully committed to sustaining Self-Sufficiency services for our vulnerable and low-income families to obtain self-sufficiency. Driven by a "whatever it takes" spirit we are focused on the following four strategies in the event of reduced Community Services Block Grant federal funding: (1) resource development by CAP staff; (2) creating and expanding program services networks, collaboratives and public/private partnerships locally and statewide to strengthen and leverage services; (3) expanding activities with community and grassroots organizations to build a comprehensive collaborative service delivery system to sustain Family Self-sufficiency services; (4) seeking out and forming collaboratives with key partners to pursue funding opportunities.

These strategies have been operationalized in the following events:

- Requesting and receiving blanket authority to apply for public and private funding opportunities that promote CAP's mission;
- Applying for grants and responding to requests for proposals to enhance current programs or implement new services that are in keeping with our Community Action Plan;
- Expansion of the Earned Income Tax Credit (EITC) program by the addition of an intergenerational partnership with American Association of Retired Persons (AARP). CAP memorialized this partnership through a signed Memorandum of Understanding. This partnership adds training resources, additional tax preparation sites, mentorship and quality assurance. The immediate impact of this partnership increased the EITC program's Volunteers in Tax Preparation (VITA) sites that are available to seniors and low-income working families in the neighborhoods where they live;

- Creation and implementation of a year-round program to provide homeless families with emergency hotel/motel vouchers and intensive case management. By leveraging existing resources CAP was able to marshal services into a year round collaborative network of services for homeless families. This collaborative service delivery network ensures families receive a continuum of services beginning with emergency shelter and ending in self-sufficiency;
- Partnering with Children's Hospital and Scripps Hospital to expand CAP's Child Injury Prevention Program from a Child Safety Seat distribution activity to include home safety assessment, distribution of home safety devices and information. In addition, CAP implemented an Obesity Prevention for Children Program.
- Linking Family Self-Sufficiency providers with the County's six Health and Human Services (HHSA) regions and HHSA Family Resource Centers to provide improved outreach services to clients in need of low-cost or no-cost health insurance, food stamp outreach and application referrals, childhood immunization and obesity prevention for children services.

CAP will continue efforts to achieve sustainability at the needed level for the clients we serve. In addition, CAP will continue to work towards new and innovative approaches to ensure sustainability of necessary services as we move forward.

If reduced funding could not be replaced, as an interim measure, while other strategies are going forward, the County of San Diego would request that the State follow the direction of Section 12785, Article 6, of the Government Code and use discretionary funds to alleviate the impact of reduction.

3. Section 12760: Community Action Agencies under this article shall coordinate their plans and activities with other eligible entities funded under Articles 7 (commencing with Section 12765) and 8 (commencing with Section 12770) which serve any part of their communities, so that funds are not used to duplicate particular services to the same beneficiaries and plans and policies affecting all grantees under this chapter are shaped, to the extent possible, so as to be equitable and beneficial to all grantees and the populations they serve.

CAP San Diego works with their collaborative networks to ensure duplication of services are reduced to a minimum for low-income families being served. The family self-sufficiency contracts have language included that requires ensuring that duplication of services/benefits will not occur when serving the low-income communities.

Requirement 5

DOCUMENTATION OF PUBLIC HEARINGS

1. Description of Public Hearing Process

In accordance with Government Code Section 12747, the CAP planners considered poverty related needs and the available resources. Since CAP is administratively housed within the County's Health and Human Services Agency (HHSA), planners considered the most effective ways of tapping into the Agency's considerable resources. Guided by the HHSA and CAP's strategic initiatives, the 2010-2011 public hearing process was implemented by utilizing local existing venues attended by both provider agencies and low-income community members that in one way or another access the current programs and/or agency resources available to them.

The Community Action Partnership conducted a series of Public Hearings between October 2008 and February 2009 to assess community priorities and needs within the context of the National Performance Indicators (NPIs) and County strategic initiatives. The venues for the hearings were community collaborative meetings, financial literacy classes and a homeless shelter. There were six (6) hearings held – one for each of the HHSA service regions. Notices of the hearings were published in the San Diego Union Tribune, the North County Times, The Californian and community flyers at least five days in advance. Additionally, flyers were sent to Family Self-Sufficiency (CAP's contracted providers) agencies to share with existing clients and to be distributed in their communities.

CAP, with agreement and approval from its Community Action Board, developed a survey tool that was patterned after a similar instrument created by the Institute of Public Health (an agency of San Diego State University) for the 2008-2009 CAP Plan and was designed to determine the priority areas of service needs in the community. The surveys were comprised of 16 questions including one open-ended one under the heading of "Other Comments" which provided respondents with the opportunity to provide any information or suggestions that was included in the rest of the survey. These comments along with the proposed resolution are listed below. The surveys were distributed at the public hearings, made available on-line and provided to Family Self-Sufficiency contractor agencies and any other agencies requesting them.

The hearings were structured to stimulate discussion and generate suggestions for improved service delivery. They began with staff providing a brief background of the Community Action Partnership of San Diego, the history of community action and the purpose of the hearing. The intent was to provide a context for the hearings. Following this introduction, hearing participants were given the surveys to complete. After each hearing, CAP staff facilitated an interactive discussion with participants who were asked to provide additional input on issues/concerns that may or may not have been addressed in the survey.

Over one hundred and sixty persons including community stakeholders from a variety of community agencies and members of the community attended the public hearings and completed the surveys. These stakeholders included representatives from community based and public agencies. Client surveys were provided in English and Spanish. The participating agencies covered twenty-seven zip codes throughout the County of San Diego. For a list of participating agencies and zip codes please refer to Appendix E. The results of the surveys are reported below.

2. Copies of Public Notices

(See Appendix C for copies of the Public Hearing notices.)

3. Summary of Testimony Received

Name	Sector (low-income, private)	Testimony or concerns	Was the concern addressed in the CAP?	If so, indicate the page #	If not, indicate the reason
See attached list of Public Hearing participants	Low-income sector	<p>Employment, Training and Employment Supports (Survey Q16)</p> <p>Comments centered on the need for employment assistance (and retention), training and supports. More specific requests included:</p> <ul style="list-style-type: none"> • Creation of jobs especially green ones • Providing transportation to job sites and/or help with purchasing auto. • Expanded and/or free child care • Services and training tailored to non-English speaking clients • Finding secure jobs with benefits • Services targeted to specific groups such as the seniors and homeless persons. • Providing domestic jobs • Assistance with opening/maintaining small businesses – including obtaining loans and licenses. • More individualized job search assistance especially for immigrants • Information on employee rights • Need for paid training programs. 	Yes	Appendix A NPIs 1.1 & 1.2 ?	

		<p>Employment (Oral Testimony)</p> <p>Additional resources are needed such as transportation.</p> <p>Need more assistance for populations with limited English, particularly for CalWORKs clients who are new to this country and are struggling with language barriers.</p>			
See attached list of Public Hearing participants	Low-income sector	<p>Financial Assistance (Survey Q16)</p> <p>Several comments were received which, essentially, spoke to the need for loans or grants for small businesses, education discretionary items such as extracurricular activities for children.</p> <p>Need for an advance on tax refunds.</p> <p>Financial assistance for court fees.</p> <p>Financial Assistance (oral testimony)</p> <p>Rental Assistance (FEMA, Temporary Homeless Assistance, etc) is not enough to assist clients in finding affordable housing that falls within TANF guidelines.</p> <p>Agencies currently providing this type of assistance are not easily accessed</p> <p>Increase financial assistance as needed for full time students.</p> <p>Concerns about programs facing potential funding cuts such as 1st 5 and health families.</p>	Yes	<p>Appendix A NPI 1.3</p> <p>Also, see Response i below.</p>	

See attached list of Public Hearing participants	Low-income sector	<p>Financial Literacy (Survey Q16)</p> <p>Comments expressed the need for financial literacy services in general and particularly for women, and in the areas of rental and credit repair assistance.</p> <p>Financial Literacy (Oral testimony)</p> <p>In addition to reiterating the need for credit repair services, oral testimony focused on the following:</p> <p>The need to include financial literacy in the curricula for middle and high schools</p> <p>A year round, three-phased approach to include credit repair, banking and tax preparation.</p>	Yes	<p>Appendix A NPI 1.3</p> <p>Also, see Response ii below.</p>	
See attached list of Public Hearing participants	Low-income sector	<p>Food (Survey Q10)</p> <p>Comments were general – requesting assistance with obtaining food.</p> <p>Food (Oral Testimony)</p> <p>Concerns that clients can't access emergency food when in dire need because agencies place case management requirements in addition to the client having to provide too much information about themselves and their family members.</p> <p>The increased need and current resources not sufficient to meet food necessities</p>	Yes	<p>Appendix A -NPI 6.2</p> <p>See also Response iii below</p>	

		<p>General Education Assistance</p> <p>The comments primarily noted the need for assistance with entering or re-entering adult school and the related need for supports such as child care, books and grants/scholarships.</p> <p>General Education Assistance (Oral Testimony)</p> <p>Oral testimony was similar to the written comments and, in addition, requested housing for homeless students.</p>		Appendix A -NPI 1.2	Note: Education as a support for employment is covered in the Plan in NPI 1.2
See attached list of Public Hearing participants	Low-income sector	<p>Health Care (Survey Q16)</p> <p>Several comments regarding health care and/or health insurance were received. The comments stated the need for affordable care/insurance in general and particular for immigrants</p> <p>HEALTH CARE (oral testimony)</p> <p>There needs to be more substance abuse treatment/sober living homes</p> <p>Need more mentoring services by survivor story families to families in crisis (peer to peer mentor programs have a greater impact)</p>	Yes	Appendix A - NPI 6.3	
See attached list of Public Hearing participants	Low-income sector	<p>Housing/Homeless Services</p> <p>There were several comments about the need for affordable housing. Also, legal assistance, resolution of landlord/tenant issues, and rental deposits were requested. Additionally, it was noted that housing assistance should be provided for single individuals and couples (including transitional and sober living housing) without children.</p> <p>For homeless services suggestions included more day centers with extended hours that provide shower and laundry</p>	Yes	NPI 6.2	

		<p>services for homeless individuals that are employed.</p> <p>HOUSING/HOMELESS SERVICES (Oral Testimony)</p> <p>There a lack of affordable housing in this community</p> <p>No shelters are available in the East and South Counties</p>			
See attached list of Public Hearing participants	Low-income Sector & Private Sector	<p>Legal Assistance (Survey Q16)</p> <p>Several comments regarding legal assistance were received. These included legal assistance for tenants, persons with immigration issues, and homeless persons (specifically for illegal lodging tickets).</p> <p>Need for legal training for service providers to better understand family court proceedings, thus better servicing their clients.</p>	No	See Response iv below	
See attached list of Public Hearing participants	Private Sector	<p>Mental Health/Counseling (Survey Q16)</p> <p>A need for mental health services was noted.</p>	Yes	See Response v below NPI 2.1; 4.1 & 6.3	
See attached list of Public Hearing participants	Private Sector	<p>Other</p> <p>A social service volunteer noted that there was an element of desperation among customers. Persons seeking services were desperate – afraid of losing their housing, they are hungry, do not have enough food, and are in need of medical attention but have no insurance.</p> <p>Energy services are not readily available to those who need it which impedes peoples' attainment of self-sufficiency.</p>			

See attached list of Public Hearing participants	Low Income Sector & Private Sector	<p align="center">Social Services – Public and Private</p> <p>Numerous comments pertaining to the types of services and more importantly the service delivery system were received. Comments applied to both the private network and County (programs and services operated by other HHSA sections and, in general, suggested that there are access problems, a deficit of multi-lingual/multicultural services and inadequate funding. Inter-agency collaboration was suggested as a way of providing more coordinated and effective services.</p> <p>Comments that specifically applied to County programs and services included:</p> <ul style="list-style-type: none"> • Easing process to access county benefits. • Improving Child Welfare Services (CWS) including follow up after Family re-unification plans are implemented, and offering more Domestic Violence (DV) services. • More community outreach to reduce the fear that clients have about accessing services and to reach immigrant and refugee populations. • Reducing waiting times to access services and assistance with completing forms to avoid case being closed and/or a reduction in benefits • Streamlining application process for Food Stamps and other public benefits. Also, out station county workers in the community to increase participation. • Agencies are fearful of reporting problems/issues with HHSA programs because they fear losing funding. There are concerns about how customers are treated at HHSA offices when they apply for Food Stamp benefits. • Community testimony stated that interaction with staff at FRCs when applying for Food Stamps ranged from moderately negative to extremely negative. 	Yes	<p align="center">NPI 4.1</p> <p align="center">See Response vi, vii and viii</p>	
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		<ul style="list-style-type: none"> • There is an over-emphasis on fraud and fraud prevention which feeds a culture of fear and degradation. These are serious access issues involved in applying for and obtaining Food Stamps. • These issues are keeping persons who are hungry and desperately in need of Food Stamps from applying for them. • Receipt of food stamps sometimes adversely impacts financial aid or other income. • Issues specific to FSS were: <ul style="list-style-type: none"> ▪ Need to increase income threshold so that less people are caught in the middle. ▪ Clients are unable to access services from (FSS provider) due to insufficient information; ▪ Agencies need to promote their services and increase outreach. ▪ Agencies need to be more courteous to customers and answer their phones. ▪ Low-income persons are not being lifted out of poverty if they are not receiving anything. ▪ Immigration status sometimes deters clients from using VITA sites. Tax preparers are not trained to handle these types of situations. ▪ Community members are concerned that VITA sites and the County are working together to intercept tax refunds for Revenue and Recovery. More outreach is needed to address these concerns. 			
See attached list of Public Hearing participants	Private Sector	<p style="text-align: center;">Transportation</p> <p>Comments indicated that persons needed assistance with transportation particularly transportation services for the disabled.</p>	Yes	(See Response iii below)	

Responses to Concerns raised during the Public Hearings

- i. Note: While CAP does not have the capacity to provide loans and grants to individuals, the EITC tax preparation described under NPI 1.3 does assist low-income families and individuals in enhancing income. Also, as described in Appendix A (NPI 1.1), CAP through its FSS contractors does provide employment assistance to participants. These providers also, to the extent possible, provide guidance to persons seeking to establish home-based businesses.
- ii. The suggestion of including financial literacy in middle and high school curricula is an excellent one. Unfortunately, San Diego has numerous school districts – all of which are facing dramatic budget cuts rendering any additional workloads untenable. Besides CAP's inclusion of financial literacy in the Family Self-Sufficiency contracts, there are other organizations such as United Way and smaller non-profits making these services available to the community.
- iii. CAP has been working with its contractors to address issues related provision of food packets to improve client access to this commodity.
- iv. CAP does not provide legal assistance. However, FSS providers do refer participants to other resources, including Legal Aid Society of San Diego as needed.
- v. When the need for these services is noted, the FSS provider will refer participant to the appropriate resource.
- vi. The desperation that was noted in one of the comments under "other" in one of the surveys was an underlying theme at more than one of the hearings. This appears to be closely related to the recent economic downturn which has left our vulnerable populations disproportionately impacted. CAP plans to help persons most impacted by the recession with the new American Recovery and Reinvestment Act (ARRA).
- vii. As mentioned in Appendix A - NPI 4.1, CAP Community Services and Initiatives (CSI) unit provides a bridge to promote community efforts and form linkages to service delivery networks. CSI will continue to work with community partners to resolve service network issues and facilitate interagency coordination. To address issues within the County's HHSA network, CAP executive staff is in communication with other agency executives to share the community concerns and come up with a plan to internally address the needs of the community. In addition, under Requirement 1 of the Community Profile, Section 1B (Self-Sufficiency Resources for low Income Residents); Section 1D (San Diego – CAP Linkages with Services Networks provides a description of the programs available to low-income families through the Health and Human Services Agency and other organizations, contracted CSBG funded programs and the activities required to participate.
- viii. CAP will convene regular contractor meetings with the FSS providers and discuss issues related to access and service provision. The specific issues raised during these public hearings will be discussed and solutions brainstormed within that venue.

Other Methods Used in Needs Assessment

Several other methods were used in completing the needs assessment. They are:

- Surveys that were completed by low income individuals and representatives of community based organizations serving low income families. Details of the survey questions and results are presented in Requirement 1, Section 2 – Needs Assessment.
- Review and analysis of U.S. Census Data
- Review and analysis of data from the San Diego Association of Governments (SANDAG). SANDAG is the association of local governments in the San Diego region which serves as the forum for regional decision making.
- Input from the Family Self Sufficiency providers, other community service providers, advocacy groups and service network collaboratives.

- A review of the County's Health and Human Services Agency's trends. HHSA is CAP's parent organization. HHSA's mission is "To make people's lives safer, healthier and self-sufficient by managing essential services." In pursuit of this mission, and in recognition of the fact social services organizations are challenged to provide greater assistance to their constituents with limited personnel and financial resources, the Agency seeks to optimize technology. The goals are to minimize administrative costs and increase the effectiveness of each dollar spent on services. Towards these ends, the Agency has, for example, implemented CalWIN (CalWORKs Information Network) in 2006. CalWIN changed the way workers determined eligibility for cash aid, Medi-Cal and Food Stamp benefits for about 165,000 cases monthly. With the transition to CalWIN workers would be allowed to spend more time working with their clients with less time devoted to paperwork.

Requirement 6

MONITORING AND EVALUATION PLAN

Describe a specific method(s) of evaluation and monitoring that ensures program and fiscal performance in accordance with the objectives in your Community Action Plan.

The plan must include the following:

1. A process to ensure that data are collected to document the progress of the agency's projections.
2. A process to ensure that reports are prepared and submitted to CSD in accordance with contract requirements.

The Community Action Partnership of San Diego (CAP) develops, evaluates and monitors the program and fiscal performance of Family Self-Sufficiency (FSS) and other Health and Human Services Agency (HHS) contracts. Monitoring, as practiced by the County of San Diego, is an on-going process of ensuring quality of service and contract compliance. The County has transitioned to performance based contracting in purchasing of services. CAP's contracts reflect this change in practice by developing Performance Work Statements which emphasize objective measurable performance objectives (outcomes) rather than process. CAP's procurement of services and monitoring of contracts also reflect this change in contracting methodology. Policies and procedures have been revised to align to the pay-for-performance methodology, and as a continuous improvement measure a Quality Assurance component has been developed that outlines each step of the process that is tested and validated.

The 2010-2011 Community Action Plan will be referenced in continuing contracts with CAP's Family Self-Sufficiency providers. The National Performance Indicators selected for the Plan and detailed in the CSD 801 (NPI Programs Report) will be incorporated as objectives in the Performance Work Statements in the FSS contracts. Specific service requirements designed to realize the objectives will also be included. CAP staff conducts routine desk and on-site reviews to ensure satisfactory achievement (results of FSS contracts) of contract objectives. Program evaluation is based on measurements of cumulative as well as individual achievement with respect to outcome objectives (See Program Evaluation below).

In accordance with the Health and Human Services Agency's External Contracting Policies, CAP has established a Contract Administration Plan that governs the monitoring of all contracts. CAP performs the primary monitoring tasks, while certain functions such as administrative and fiscal reviews have been centralized and are the responsibility of the Health and Human Services Agency's Contract Support division. The division of monitoring responsibilities is indicated below.

1. CAP Monitoring Responsibilities

Development of Monitoring Plan/Tool

Contract Administrators monitor contracts for compliance and are responsible for developing a monitoring plan specific to each contract assigned. The monitoring plan forms the basis for monitoring performance, determines the frequency of site visits, and serves as a roadmap for the contract administrator to determine contractor performance. A critical aspect of the plan involves the development of monitoring tools for site visits. Monitoring tools mirror the Performance Work Statements and aid staff in determining whether the contractor is in compliance with the contract, and whether contractor systems produce reliable and accurate information.

a. Contractor Orientation

CAP staff conducts contractor orientations for new contracts. The orientation provides a forum to discuss contractor and staff roles and responsibilities, contract requirements, Scope of Work and payment methods.

b. Performance Monitoring

CAP uses the monitoring plan to ensure compliance with contract provisions through the following methods:

- Site visits - Staff visit contractors and project sites periodically to evaluate contract compliance through observation, interviews, examination and verification of records. Site visits include entrance and exit conferences, and focus on compliance with the Performance Work Statement and the contractor's internal control systems and delivery processes. The frequency of site visits varies.
- Contractor meetings – CAP schedules regular operational meetings with contractors to review/resolve issues on an as-needed basis.
- Desk reviews – Reviews of Quarterly or Monthly Progress Reports to ensure completeness and accuracy of the report. Reports are reviewed upon receipt and outcomes are closely tracked for achievement results.
- Invoice validation – As part of the transition to performance based contracting, the payment structure parallels the performance work statement. Payments are closely aligned with the outcomes. Therefore CAP's monitoring system now includes invoice validation as part of the routine monitoring. Invoice validation activities include:
 - ❑ Review of pay points claimed and supporting documentation to ensure validity of claim;
 - ❑ Checking accuracy of calculations and validity of costs against the contract budget for cost reimbursement line items;
 - ❑ Ensuring delivery of services or deliverables upon which payment is predicated;
 - ❑ Resolving any identified discrepancies;

- ❑ Approving the claim and forwarding it for payment; and
 - ❑ Periodic on-site validation of contractor expenses for approved line items and pay points claimed.
- Technical Assistance – Contract staff clarifies and interprets policies and procedures, and makes referrals to appropriate resources to help contractors improve systems.
- Corrective Action Notices (CANs) – When contractor performance fails to meet acceptable standards and technical assistance does not achieve the desired results, notices of non-compliance are issued to ensure contract compliance. Contractor failure to respond to a CAN that specifies what actions need to be taken to address the area of non-compliance may result in suspension of reimbursement.

2. Agency Contract Support Monitoring Responsibilities

The Agency Contract Support Division is responsible for three monitoring tasks: 1) reviewing contract standard terms and conditions; 2) conducting special reviews that are investigative in nature and usually result from allegations of misconduct; and 3) conducting reviews of contractors' fiscal systems. All Agency Contract Support reviews of CAP contracts are conducted in coordination with CAP.

3. Reporting

CAP's reporting system ensures that data are collected to document the progress of the projections detailed in the CSD 801 (Programs Report) and that reports summarizing these data are prepared and submitted to CSD in accordance with contract requirements.

CAP has instituted a comprehensive system to ensure accurate and timely reporting to funding sources. The system is comprised of the following components:

- Report templates for each of CAP's FSS providers. These templates mirror the projections detailed in the CSD 801 (Programs Report).
- Conducting periodic checks of funding source, including CSD, websites to confirm report deadlines.
- A master grid that tracks all required reports and includes report periods, deadlines and other critical information.
- An automated tickler system to alert key individuals about approaching deadlines for completion of reports.
- Automated roll up of key data elements using linked spreadsheets.
- Designated staff with clearly defined reporting responsibilities.

4. Program Evaluation

Evaluation of the service providers will answer five questions:

- a. Will the program achieve its intended outcomes?
- b. What barriers, problems, or systemic factors blocked achievement of objectives?
- c. What was the impact (that is, what difference did the achieved outcomes make)?
- d. What changes in strategic directions, goals, and/or objectives need to be made?
- e. What process changes need to be made?

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Goal 1: Low-income people become more self-sufficient.

NPI 1.1: Employment

Problem Statement: (If additional space is needed, please attach a separate sheet.)

San Diego's overall economy, which until recently was relatively stable, has been impacted by the national downturn. The region's residents who are either unemployed or in low-paying, high turnover occupations have increased in number. Additionally, the number of mid-level positions is limited. For self-sufficiency to be a reality, families need full-time, living wage jobs, with potential for upward mobility and medical benefits. Limited English proficiency, immigration issues, high cost of child care, lack of affordable housing, lack of transportation, limited skills/experience and education, substance abuse, cultural barriers and

Program Activities and Delivery Strategies: (If additional space is needed, please attach a separate sheet.)

Since the problem is multi-dimensional, no single strategy can be successful. Successful planning requires a multi-faceted strategy for which collaboration and leveraging of resources is key. Leveraging is planned at the highest level with the Community Action Partnership (CAP) engaging with the Workforce Partnership (the region's Workforce Investment Act WIA governance organization) to reinforce existing collaboration and develop mutually beneficial activities to employ low-income families. (Continued on attached page.)

National Performance Indicator 1.1 Employment	1 Number of Participants Projected to be Served for Contract Period (#)	2 Number of Participants Enrolled in Program(s) in Reporting Period (#)	3 Number of Participants Expected to Achieve Outcome in Reporting Period (#)	4 Number of Participants Achieving Outcome in Reporting Period (#)	5 Percentage Achieving Outcome in Reporting Period (%)
The number and percentage of low-income participants in community action employment initiatives who get a job or become self-employed, as measured by <u>one or more</u> of the following:					
A. Unemployed and obtained a job	1,200				
B. Employed and obtained an increase in employment income	200				
C. Achieved "living wage" employment and benefits					

In the rows below, please include any additional indicators for NPI 1.1 that were not captured above.

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Goal 1: Low-income people become more self-sufficient.

NPI 1.1 Employment

Delivery Strategy

With groundwork laid out at the administrative level (CAP), CAP's contracted providers are required and guided to implement collaborations in all six service regions of the County, by working closely with each WIA career center. CAP's strategy also considers the public assistance status of the customer since these customers can and do tap into the additional resources available through the CalWORKs employment services network.

On the macro service level, CAP also seeks to enhance *future* opportunities for low-income families. For example, in 2008 and previous years, the Community Action Partnership has partnered with Scripps Hospital to advance a curriculum that promotes health careers. This innovative program was developed and implemented by CAP's Community Strategies and Initiatives unit to address the anticipated gap for health care workers. The program began with the recognition that workplace and educational barriers often challenge low-income youth who wish to explore health professions. Therefore, middle school aged children were provided with information, guidance and support to assist them in identifying and pursuing careers in the health care industry. The project also paired youth with health professionals from various careers. CAP will seek out additional funding opportunities to implement similar projects.

Finally, recognizing that poverty and dependency are both systemic and individual in nature, CAP's Family Self-Sufficiency (FSS) program will continue to emphasize the strengthening of family functioning. FSS services, through case management of program participants, will focus on improving the ability of potentially employable family members to become job ready and develop social competence. Given that the needs assessment showed that significant numbers of low-income families are employed, CAP's strategy includes planned employment upgrades for FSS participants.

Note: Activities listed under Employment Supports (NPI 1.2) are integrally linked with Employment goals.

Program Activities

Macro Level – Community Action Partnership

1. Engage in discussions and foster partnerships between the County's FSS contractors and the Workforce Partnership Career Centers and Scripps Hospital with the goal of developing better, more coordinated, integrated, employment and vocational and employment readiness training services.

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2. Leverage and facilitate contractor linkages to Mental Health Services Act (MHSA) county funded vocational training and support services for people with mental health barriers.
3. Identify additional appropriate resources for employment placement and readiness assistance and create true partnerships that lead to coordinated and integrated services.
4. Provide technical assistance to CAP FSS contractors to develop partnerships and resources at the community level.

Family Service Level

1. Conduct comprehensive assessments to determine participants' employment needs and skills, and barriers to achieving employment goals. Engage participant and provide appropriate support to resolve barriers.
2. Work with participants to develop plans for self-sufficiency through employment. These individual plans will include a strategy for upgrading employment as well.
3. Utilize case management to strengthen family functioning and enhance social competence particularly as it relates to employment.
4. Provide and/or refer for job search assistance. Activities include job preparation services such as résumé preparation, pre-employment work maturity skills, training, and placement for program participants.

Activities related to CalWORKs Participants

1. As a primary strategy, support the plan developed by the CalWORKs Employment Service Case Manager, in conjunction with the participant to support the participant's efforts in obtaining employment.
2. Maintain formal linkages to County Family Resource Centers.

Activities related to Non-CalWORKs Participants

1. Family Self-Sufficiency program manager or service manager will work in tandem with WIA career center staff or other appropriate staff to develop and implement a plan for training that leads to employment for those participants who possess marketable skills.
2. Develop employment placement opportunities that are suitable to the skills and abilities for unemployed participants.
3. Upgrade employment through additional education or enhancement of employment skills - for employed participants.

Goal 1: Low-income people become more self-sufficient.

NPI 1.2: Employment Supports

Problem Statement: (If additional space is needed, please attach a separate sheet.)

Barriers to obtaining and/or retaining employment are numerous. They include, for instance, limited English proficiency, adults timing out of CalWORKs, limited skills and education, and substance abuse. Barriers generally fall into two categories: those that can be resolved by enhancing education or training; and those for which the lack of support systems such as childcare and reliable, affordable transportation constitutes an obstacle to employment. (Continued on attached page.)

Program Activities and Delivery Strategies: (If additional space is needed, please attach a separate sheet.)

The strategy to address employment supports will encompass two approaches. On one level CAP will work with regional service networks, key partners and stakeholders to develop new supports and link existing support structures that assist low income families and individuals. On a secondary level, service assessments completed by case managers in the Family Self-Sufficiency program will prioritize target barriers to employment. The more significant the barrier, the greater is the emphasis placed on its resolution. (Continued on attached page.)

National Performance			
Employment Supports	1 Number of Participants Projected to be Served for Contract Period (#)	2 Number of Participants Enrolled in Program(s) in Reporting Period (#)	3 Number of Participants Achieving Outcome in Reporting Period (#)
The number of low-income participants for whom barriers to initial or continuous employment are reduced or eliminated through assistance from community action, as measured by <u>one or more</u> of the following:			
A. Obtained pre-employment skills/competencies required for employment and received training program certificate or diploma			
B. Completed ABE/GED and received certificate or diploma			
C. Completed post-secondary education program and obtained certificate or diploma			
D. Enrolled children in "before" or "after" school programs, in order to gain or maintain employment	200		
E. Obtained care for child or other dependant in order to gain or maintain employment	400		
F. Obtained access to reliable transportation and/or driver's license in order to gain or maintain employment			
G. Obtained health care services for themselves or a family member in support of employment stability needed to gain or retain employment.			
H. Obtained safe and affordable housing in support of employment stability needed to gain or retain employment.			
I. Obtained food assistance in support of employment stability needed to gain or retain employment.			

In the rows below, please include any additional indicators for NPI 1.2 that were not captured above.

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4. Refer participant for short-term vocational training and education, and/or work experience to obtain marketable skills that will lead to employment.

NPI 1.2 Employment Supports

Problem Statement (Continued from NPI 1.2)

According to the Needs Assessment, the current public transportation system is inadequate for low-income families to obtain/retain employment. The high cost of living, coupled with inadequate levels of income, often leaves few dollars for purchase and maintenance of reliable private transportation. The lack of reliable transportation then makes access to employment and the means to move out of poverty even more challenging.

Many clients cannot afford vehicles; therefore families must access bus and trolley lines to transport their children to school or daycare before actually beginning their commute to work. Compounding this problem is the fact that childcare facilities and employers are often located in different directions which adds hours to an already burdensome commute.

Additionally, there are major gaps in the service network that provides employment supports. While there are funds allocated to assist CalWORKs participants with supportive services for employment – e.g., money for transportation, childcare and tools, there is no similar structure in place for non-cash public assisted individuals. Therefore, many low-income working families and those seeking employment are left without benefit of comparable support.

Delivery Strategies

Additionally contracted case managers will assist customers in the Family Self-Sufficiency program develop a plan utilizing all available resources to address all barriers to employment such as childcare and transportation needs. Assistance will address immediate crisis needs but a greater emphasis will be placed on intermediate and long range plans to resolve barriers. The emphasis will be to help families identify and use their strengths to develop coping skills that address and resolve long-term barriers.

Program Activities

Macro Level – Community Action Partnership

1. Engage in executive level discussions with service networks and their member organizations to develop new and link existing support services, especially for non-cash assisted customers.
2. Identify existing resources and facilitate/coordinate discussions with key stakeholders to develop strategies for the populations we commonly serve.

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1. Ensure that the comprehensive employment assessment identifies participants' employment barriers and supports needed to achieve employment goals.
2. Explore opportunities for carpooling and/or obtaining employment in locations that are easily accessible by means of public transportation.
3. Encourage families to formulate back-up plans to address unforeseen crises (e.g., transportation, child care).
4. Utilize Family Development – intensive case management to support and guide the customer in resolving barriers to employment.
5. Provide outreach and financial education regarding utilization of EITC refunds to purchase vehicles needed for employment.

Activities related to CalWORKs Participants

1. Become familiar with the CalWORKs Welfare-to-Work plan.
2. Work closely with the CalWORKs employment case managers to obtain needed supportive services for FSS customers and to ensure that clients are receiving all they are eligible to receive.

Activities related to Non-CalWORKs Participants

1. For childcare issues, FSS providers will assist program participants in finding quality and affordable childcare, including assistance with application and placement on the Centralized Childcare Eligibility List, which serves the entire San Diego area.
2. When appropriate, utilize linkages with other community-based organizations to assist clients with transportation and childcare issues.
3. Refer participant for vocational training and education, and/or work experience.

Goal 1: Low-income people become more self-sufficient.

NPI 1.3: Economic Asset Enhancement and Utilization

Problem Statement: (If additional space is needed, please attach a separate sheet.)

As the needs assessment shows, family and individual earnings are often insufficient for basic needs. To move out of poverty, low-income families need resources and assistance to expand their asset base. Often this population is unaware of assistance such as free tax preparation assistance. They may also need help to recover from past financial difficulty such as poor credit history and often fall prey to predatory loan institutions. Compounding the problem is the fact that low-income families are not in situations that allow them to take full advantage of financial opportunities.

Program Activities and Delivery Strategies: (If additional space is needed, please attach a separate sheet.)

A key component in CAP's strategy for moving families out of poverty is utilization of the Earned Income Tax Credit. Complementing and supporting this strategy is CAP's Family Development approach which provides the additional supports families need to maximize income and attain self-sufficiency. (Continued on attached page.)

National Performance Indicator 1.3	1	2	3	4	5	6
Economic Asset Enhancement and Utilization The number and percentage of low-income households that achieve an increase in financial assets and/or financial skills as a result of community action assistance, and the aggregated amount of those assets and resources for all participants achieving the outcome, as measured by <u>one or more</u> of the following:	Number of Participants Projected to be Served for Contract Period (#)	Number of Participants Enrolled in Program(s) in Reporting Period (#)	Number of Participants Expected to Achieve Outcome in Reporting Period (#)	Number of Participants Achieving Outcome in Reporting Period (#)	Aggregated Dollar Amounts (Payments, Credits or Savings) (\$)	Percentage Achieving Outcome in Reporting Period (%)
A. ENHANCEMENT						
1. Number and percent of participants in tax preparation programs who identify any type of Federal or State tax credit and the aggregated dollar amount of credits						
2. Number and percentage obtained court-ordered child support payments and the expected annual aggregated dollar amount of payments						
3. Number and percentage enrolled in telephone lifeline and/or energy discounts with the assistance of the agency and the expected aggregated dollar amount of savings.						

In the rows below, please include any additional indicators for NPI 1.3 that were not captured above.

National Performance Indicator 1.3 (Continued)	1	2	3	4	5	6
Economic Asset Enhancement and Utilization	Number of Participants Projected to be Served for Contract Period (#)	Number of Participants Enrolled in Program(s) in Reporting Period (#)	Number of Participants Expected to Achieve Outcome in Reporting Period (#)	Number of Participants Achieving Outcome in Reporting Period (#)	Aggregated Dollar Amounts (Payments, Credits or Savings) (\$)	Percentage Achieving Outcome in Reporting Period (%)
The number and percentage of low-income households that achieve an increase in financial assets and/or financial skills as a result of community action assistance, and the aggregated amount of those assets and resources for all participants achieving the outcome, as measured by <u>one or more</u> of the following:						

B. UTILIZATION

1. Number and percent demonstrating ability to complete and maintain a budget for over 90 days						
2. Number and percent opening an Individual Development Account (IDA) or other savings account and increased savings, and the aggregated amount of savings						
3. Of participants in a community action asset development program (IDA and others):						
a. Number and percent capitalizing a small business due to accumulated savings						
b. Number and percent pursuing post secondary education due to savings						
c. Number and percent purchasing a home due to accumulated savings						

In the rows below, please include any additional indicators for NPI 1.3 that were not captured above.

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Since 2003, CAP has led a public/private partnership with the United Way and the Internal Revenue Service to create a countywide EITC Coalition committed to EITC awareness and expansion of the EITC campaign through collaborative partnerships. Today the EITC Coalition is comprised of approximately 20 participating organizations. Workforce Partnership, San Diego Gas and Electric, County Board of Supervisors (Pam Slater-Price and Greg Cox), the American Association of Retired Persons (AARP), Alliance for African Assistance and Legal Aid, IRC, MAAC Mabuhay Alliance, ACORN, 2-1-1 San Diego. Through its members, the EITC Coalition leverages additional resources to support expansion efforts. Coalition members engage in pre-season planning and post-season de-briefing to continuously enhance the program and provide quality service to customers.

Complementing and supporting this strategy is the financial education component. CAP recognizes that financial education is essential in the process of becoming self-sufficient. Therefore, CAP through the Family Self-Sufficiency program is promoting financial education workshops and has implemented core financial competencies.

At the service level, customers will learn how to develop and maintain budgets and effectively use financial resources.

Program Activities**Macro Level – Community Action Partnership in partnership with Other County Sections and Community Based Organizations**

1. Continue to provide leadership to the EITC Coalition.
2. Work closely with the Internal Revenue Service to provide support and technical assistance.
3. Outreach to HHSA CalWORKs and Food Stamps recipients by working with the County's HHSA Family Resource Centers.
4. Engage community-based Family Resource centers and CBOs to outreach to potential customers.
5. Implement strategies to keep volunteers engaged.
6. Promote collaboration and leveraging in CAP contracts with community-based organizations.

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7. Establish and or enhance relationships with financial institutions or agencies with existing programs that offer free or drastically reduced fees for savings and checking accounts for FSS participants. We have partnered with Supportive Parents Information Network (SPIN) which is a member of the San Diego Banking Coalition to access banks that will provide low/no-cost banking.
8. Continue to recruit Coalition Partners.

Family Service Level

1. Assist EITC efforts by referring and facilitating economically disadvantaged persons in need of free tax preparation assistance to Volunteer Income Tax Assistance (VITA) sites.
2. Provide financial education workshops on such topics as budgeting, identification of predatory lending and ways to establish good credit and remedy bad credit. To strengthen this area, the new CAP FSS contracts require: providers to conduct pre and post-evaluations to assess clients' understanding of key financial literacy indicators such as knowledge of personal finances; and, when possible to open bank accounts with no fees or low-cost fees.
3. Provide access to assistance programs such as child support, Social Security benefits, Food and Nutrition programs, low-cost or no-cost health insurance, educational loans and grants.

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Goal 2: The conditions in which low-income people live are improved.

NPI 2.1: Community Improvement and Revitalization

Problem Statement: (If additional space is needed, please attach a separate sheet.)

As in many urban areas, San Diego has several low-income communities whose residents have limited access to resources for childcare, health care and transportation where poverty is a limiting factor to self-sufficiency. There are many community-based organizations and agencies in San Diego that strive to assist low-income families and individuals. However, many of these community-based organizations and agencies lack the financial base and/or technical capacity to assist low-income families.

Program Activities and Delivery Strategies: (If additional space is needed, please attach a separate sheet.)

CAP's FSS Case Management focuses on strengthening families and improving family relations to ensure well-functioning, healthy individuals. (Continued on attached page.)

National Performance Community Improvement and Revitalization	1 Number of Projects Projected for Contract Period (#)	2 Number of Projects or Initiatives (#)	3 Number of Opportunities and/or Community Resources Preserved or Increased (#)
Increase in, or safeguarding of threatened opportunities and community resources or services for low-income people in the community as a result of community action projects/initiatives or advocacy with other public and private agencies, as measured by <u>one or more</u> of the following:			
A. Accessible "living wage" jobs created or saved from reduction or elimination in the community.			
B. Safe and affordable housing units created in the community			
C. Safe and affordable housing units in the community preserved or improved through construction, weatherization or rehabilitation achieved by community action activity or advocacy			
D. Accessible and affordable health care services/facilities for low-income people created or saved from reduction or elimination.			
E. Accessible safe and affordable childcare or child development placement opportunities for low-income families created or saved from reduction or elimination.			
F. Accessible "before school" and "after school" program placement opportunities for low-income families created or saved from reduction or elimination.			
G. Accessible new, or expanded transportation resources or those that are saved from reduction or elimination, that are available to low-income people, including public or private transportation.			
H. Accessible or increased educational and training placement opportunities or those that are saved from reduction or elimination, that are available for low-income people in the community, including vocational, literacy and life skill training, ABE/GED, and post-secondary education.			

In the rows below, please include any additional indicators for NPI 2.1 that were not captured above.

Goal 2: The conditions in which low-income people live are improved.

NPI 2.2: Community Quality of Life and Assets

Problem Statement: (If additional space is needed, please attach a separate sheet.)

Program Activities and Delivery Strategies: (If additional space is needed, please attach a separate sheet.)

National Performance Indicator 2.2 Community Quality of Life and Assets The quality of life and assets in low-income neighborhoods are improved by community action initiative or advocacy, as measured by <u>one or more</u> of the following:	1 Number of Programs Projected for Contract Period (#)	2 Number of Program Initiatives or Advocacy Efforts (#)	3 Number of Community Assets, Services or Facilities Preserved or Increased (#)
A. Increases in community assets as a result of a change in law, regulation or policy, which results in improvements in quality of life and assets			
B. Increase in the availability or preservation of community facilities			
C. Increase in the availability or preservation of community services to improve public health and safety			
D. Increase in the availability or preservation of commercial services within low-income neighborhoods			
E. Increase or preservation of neighborhood quality-of-life resources			
<i>In the rows below, please include any additional indicators for NPI 2.2 that were not captured above.</i>			

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Services ensure safe environments for middle school-age youth during after-school hours promote learning and encourage positive behavior. Prevention and intervention services are provided through collaboration with school and local communities. Services include homework assistance and tutoring and activities which promote personal identification with the community and the development of a healthy self-esteem. A more detailed listing is provided in the narrative for NPI 6.3.

OPTIONAL Narrative for Goal 2 (Continued)

Develop partnerships with organizations that share CAP's vision and mission of eliminating poverty. Currently, CAP SD is working with the San Diego Refugee Forum, a professional association of Refugee service providers, whose members include Voluntary Agencies (VOLAGS), Mutual Assistance Agencies (MAAs), Employment Services agencies, Government Agencies, and community residents. The majority of the refugee community based organizations are MAAs, grassroots organizations, operating on donations, small grants and providing services through volunteer staff. Over the years, these refugee community based organizations have established trust within the refugee community and have been successful working with refugee families providing advocacy, referral, translation services and linkages to mainstream services. These community based organizations are committed to serving and reaching refugee families who traditionally have not been served and continue to assist families become mentally and physically healthy and self-sufficient. CAP SD continues to be a member of the Refugee Forum and will assist in pursuing funding that will assist member organizations become fiscally self-sufficient and stable by strengthening their infrastructure. Technical assistance, professional development and development of long term fiscal sustainability will be provided to assist in the provision of needed services and implementation of strategies that increase linkages to mainstream services.

Program Activities

1. Identify community organizations – these can be social service providers or educational institutions - which serve low-income residents and share the mission of eliminating poverty.
2. Develop partnerships with community-based organizations.
3. Share results of community needs assessments and demographic data.

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4. Develop joint strategies to address needs of low-income families.
5. Assist organizations with capacity building and technical support.
6. Build collaboratives to pursue funding.

Goal 3: Low-income people own a stake in their community.

NPI 3.1: Civic Investment

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This information will be reported in Part I: Section F, Subsection IV (g) of the CSBG IS Survey.

Goal 3: Low-income people own a stake in their community.

NPI 3.2: Community Empowerment Through Maximum Feasible Participation

Problem Statement: (If additional space is needed, please attach a separate sheet.)

Program Activities and Delivery Strategies: (If additional space is needed, please attach a separate sheet.)

National Performance Indicator 3.2	1	2
Community Empowerment Through Maximum Feasible Participation The number of low-income people mobilized as a direct result of community action initiative to engage in activities that support and promote their own well-being and that of their community, as measured by <u>one or more</u> of the following:	Number of Participants Projected for Contract Period (#)	Number of Low-Income People Achieved in Reporting Period
A. Number of low-income people participating in formal community organizations, government, boards or councils provide input to decision-making and policy setting through community action efforts		
B. Number of low-income people acquiring businesses in their community as a result of community action assistance		
C. Number of low-income people purchasing their own homes in their community as a result of community action assistance		
D. Number of low-income people engaged in non-governance community activities or groups created or supported by community action		

In the rows below, please include any additional indicators for NPI 3.2 that were not captured above.

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Goal 3: Low-income people own a stake in their community.

NPI 3.1: Civic Investment

Problem Statement

Given the multitude of San Diego low-income families' needs, the necessary resources to address the variety of needs is inadequate.

Program Activities and Delivery Strategies

Through CAP's network of providers, actively encourage additional support to low-income residents in the form of volunteers. One area in particular where this strategy is effectively employed is the provision of tax assistance through VITA trained volunteers. In tax season 2006, AARP joined the EITC coalition. In tax season 2007, AARP recruited over 200 volunteers to provide free tax assistance and in tax season 2008, doubled to 400 volunteers. For the current tax season, CAP anticipates these volunteer numbers will again show an increase.

Civic Investment

Total number of hours volunteered to Community Action will be reported in Part 1: Section F, Subsection IV (g) of the CSBG IS survey.

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Goal 4: Partnerships among supporters and providers of services to low-income people are achieved.

NPI 4.1: Expanding Opportunities through Community-Wide Partnerships

Problem Statement: (If additional space is needed, please attach a separate sheet.)

Needs identified through the various needs assessments conducted by public and private agencies do not always translate into service delivery strategies. This is often because funding constraints mean opting for one program and not selecting another. However, awareness of community priorities, and improved coordination between agencies would enable public planners and administrators to maximize public service dollars and improve communities.

Program Activities and Delivery Strategies: (If additional space is needed, please attach a separate sheet.)

The Community Strategies and Initiatives (CSI) unit is guided by CAP's vision of changing people's lives, embodying the spirit of hope, and improving the various communities of San Diego. This unit was expressly formed to strategically promote CAP's mission of empowering economically disadvantaged individuals/families to achieve their highest levels of self-sufficiency and well being through establishing and enhancing existing linkages to promote cohesive service networks. (Please see attached sheet for specific activities.)

National Performance <u>Indicator 4.1</u>		1	2
Expanding Opportunities Through Community-Wide Partnerships			
The number of organizations, both public and private, community action actively works with to expand resources and opportunities in order to achieve family and community outcomes.		Number of Partnerships Projected for Contract Period (#)	Number of Organizational Partnerships Achieved in Reporting Period (#)
A. Number of organizations community action agencies work with to expand family and community outcomes			
B. Number of partnerships that were with faith-based organizations.			

In the rows below, please include any additional indicators for NPI 4.1 that were not captured above.

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Goal 4: Partnerships among supporters and providers of services to low-income people are achieved.

NPI 4.1: Expanding Opportunities through Community-Wide Partnerships

Delivery Strategies (Continued)

Technology Focus

CAP is administratively located within the County's Health and Human Services Agency. CAP will continue to strengthen networks by more efficiently increasing the linkages with 2-1-1, Family Resource Centers, FSS provider agencies and others to develop close working relationships to ensure that our vulnerable populations are better served.

More specifically, and as previously noted, CAP recognizes the need to use technology to leverage resources. Maximizing call centers and websites to provide information and referral will be critical to address the rising demand for services. The plan is to build community capacity by increasing access to online or web based tools while identifying more effective ways of accessing information and services in order to meet the needs of our low-income families. CAP San Diego will continue to seek out opportunities that strengthen the linkages with 211, education partners, law enforcement, Family Resource Centers, Family Self Sufficiency providers and other partners. In addition, CAP will ensure FSS providers have linkages to the Access-in-Crisis hot line through United Behavioral Health (UBH) which provides another avenue to access to assistance with mental health related issues.

Building/Supporting Collaboratives

Recognizing that funding is always a limiting factor, CAP San Diego formed the Community Strategies and Initiatives (CSI) unit. The unit provides a bridge to promote community efforts and form linkages to service delivery networks. Additionally, the unit facilitates the development of community collaboratives that seek to promote asset building and asset protection strategies.

The assigned CSI liaison partners with key regional staff and community stakeholders to support regional collaboratives/initiatives that align with anti-poverty strategies for family stability and self-sufficiency. The focus is on the multiple service needs of low-income families/individuals, identifying and developing common threads between regional operations and CAP initiatives, and emphasizing interactive relationships across the agency (formal/informal) to problem solve service issues.

CSI liaisons collaborate with community partners and Health and Human Services Agency regional management, and help achieve shared objectives by engaging in the following key strategies:

- Informing – Serve as a communication conduit to plan, problem solve and address issues raised.

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- Advocacy – Provide support for regional and CAP initiatives.
- Facilitating – Address problems and assist in the implementation of regional solutions.
- Bridging – Link service providers (County and community) to better serve our customers.
- Identifying Opportunities – Provide information to stakeholders on potential funding and other available resources. Partner with stakeholders to pursue potential funding and use of available resources.

Program Activities

CSI liaisons address key problems and offer recommendations/solutions. Examples of specific activities are:

- Ensuring that FSS contractors develop a uniform and consistent mechanism for assisting families in obtaining/maintaining health coverage.
- Ensuring that FSS contractors assist families in linking with a medical home where appropriate.
- Identifying community providers with which FSS contractors can link to promote enrollment of eligible families in Medi-Cal and Healthy Families.
- Working with community providers, including CAP contractors, and Health and Human Services Agency's Family Resource Center staff to develop health information packets for distribution to customers. Contents would include information on asthma control/education, dental health issues and resources, and mental health information and resources.
- Promoting coordination between service providers who have several service contracts with the County to maximize efficiency and facilitate achievement of shared objectives.
- Identifying and sharing best practices with community agencies and regional management.
- Acting as a resource for information related to anti-poverty measures and developing strategies to address issues of poverty in the region.
- Participating in community events to highlight CAP's initiatives and programs.

Goal 5: Agencies increase their capacity to achieve results.

NPI 5.1: Broadening the Resource Base

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The totals will be reported in PART I: SECTION F, Subsection I-IV of the CSBG/IS Survey

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Goal 5: Agencies increase their capacity to achieve results.

NPI 5.1: Broadening the Resource Base

Problem Statement

As the CSBG allocation continues to decline, unfortunately the multitude of needs of low-income families and individuals continues to rise. As an example, on a per capita basis, in San Diego County there is only \$8.52 (based on an approximate CSBG allocation of \$2.9 million and approximately 340, 000 low-income families identified in the 2000 census) available to assist low-income families and individuals. Consequently leveraging of all available resources is essential.

Delivery Strategies

CAP is registered with the Office of Resource Development (ORD). ORD assists community agencies as well as County programs and departments to identify funding opportunities available from public and private sources. CAP assists by identifying community agencies for the ORD mailing list and shares relevant funding announcements from the Office with our providers. Additionally, CAP partners with private and public partners in the pursuit of appropriate funding.

CAP provides services through contracted service providers. By actively supporting community agencies and infusing dollars through competitive procurements, CAP contributes to the development and expansion of the service network infrastructure in San Diego. CAP also receives funds from other sources to operate other community programs which used to leverage additional services.

Program Activity

San Diego County Board of Supervisors (BOS) policy B-29 requires County departments to obtain BOS approval prior to initiating application for or acceptance of funding from any outside sources. However, San Diego County BOS has approved and authorized San Diego County CAP staff to pursue funding opportunities that are in line with the Community Action Partnership Initiatives: Family Self-Sufficiency Services, Earned Income Tax Credit, and Homeless Services, when there is no match requirement from the County of San Diego, other than in-kind, without obtaining this pre-approval.

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Goal 6: Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive environments.

NPI 6.1: Independent Living

Problem Statement: (If additional space is needed, please attach a separate sheet.)

Program Activities and Delivery Strategies: (If additional space is needed, please attach a separate sheet.)

National Performance <u>Indicator 6.1</u>	1	2
Independent Living The number of vulnerable individuals receiving services from community action that maintain an independent living situation as a result of those services:	Number of Individuals Projected to be Served for Contract Period (#)	Number of Vulnerable Individuals Living Independently in Reporting Period (#)
A. Senior Citizens		
B. Individuals with Disabilities		

In the rows below, please include any additional indicators for NPI 6.1 that were not captured above.

Goal 6: Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive environments.

NPI 6.2: Emergency Assistance

Problem Statement: (If additional space is needed, please attach a separate sheet.)

The San Diego Region is one of the highest cost areas in the nation. Despite the economic downturn, the region continues to be one of the most expensive housing markets in the nation. The County also lacks sufficient affordable housing and shelters for homeless individuals and families, domestic violence victims, and runaway youth. These facts coupled with a high proportion of low-wage jobs pose considerable barriers to self-sufficiency. On a more essential level, it often forces families to choose between basic necessities. (Please see attached sheet for additional information)

Program Activities and Delivery Strategies: (If additional space is needed, please attach a separate sheet.)

Address emergency needs through contracted services with FSS providers. Provide homeless services (vouchers, etc) for emergency shelter - in partnership with the city. Work on long range homeless solution. (Please see attached sheet for additional information)

National Performance Indicator 6.2	1	2	3	4
Emergency Assistance The number of low-income individuals or families served by community action that sought emergency assistance and the percentage of those households for which assistance was provided, including such services as:	Unit of Measurement	Number of Households Projected to be Served for Contract Period (#)	Number of Household Seeking Assistance in Reporting Period (#)	Number of Households Receiving Assistance in Reporting Period (#)
A. Food - Indicate <u>your state's</u> unit of measurement, such as bags, packages, cartons, families, individuals, etc.	(Number of times Household Received Food)	24,000		
B. Emergency payments to vendors, including Fuel and Energy bills and Rent/Mortgage payments	Households			
C. Temporary shelter	Households	1,000		
D. Emergency medical care	Households			
E. Protection from violence	Households			
F. Legal assistance	Households			
G. Transportation	Households			
H. Disaster Relief	Households			
I. Clothing	Households			

In the rows below, please include any additional indicators for NPI 6.2 that were not captured above.

Goal 6: Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive environments.

NPI 6.3: Child and Family Development

Problem Statement: (If additional space is needed, please attach a separate sheet.)

Too many youth engage in at-risk behavior such as gang activity and use of tobacco. Many youth also take part in criminal acts and enter the juvenile justice system causing long-term harm to themselves, extensive family problems and enormous expenses to their communities and society. Some of the at-risk behaviors are associated with suicides and homicides. (See attached sheet for additional information)

Program Activities and Delivery Strategies: (If additional space is needed, please attach a separate sheet.)

CAP's FSS case management focuses on strengthening families and improving family relations to ensure well-functioning, healthy individuals. Additionally, two other programs are specifically tailored to meet the needs of at-risk youth: Critical Hours and Juvenile Diversion services. (See attached sheet for specific activities)

National Performance Indicator 6.3	1	2	3	4	5
Child and Family Development The number and percentage of all infants, children, youth, parents, and other adults participating in developmental or enrichment programs that achieve program goals, as measured by <u>one or more</u> of the following:	Number of Participants Projected to be served for Contract Period (#)	Number of participants Enrolled in Program(s) in Reporting Period (#)	Number of Participants Expected to Achieve Outcome in Reporting Period (#)	Number of Participants Achieving Outcome in Reporting Period (#)	Percentage of Participants Achieving Outcome in Reporting Period (%)
A. INFANTS & CHILDREN					
1. Infants and children obtain age appropriate immunizations, medical and dental care					
2. Infant and child health and physical development are improved as a result of adequate nutrition					
3. Children participate in pre-school activities to develop school readiness skills					
4. Children who participate in pre-school activities are developmentally ready to enter Kindergarten or 1st Grade					

B. YOUTH					
1. Youth improve physical health and development					
2. Youth improve social/emotional development	33				
3. Youth avoid risk-taking behavior for a defined period of time	32				
4. Youth have reduced involvement with criminal justice system	1834				
5. Youth increase academic, athletic or social skills for school success by participating in before or after school programs					
C. PARENTS AND OTHER ADULTS					
1. Parents and other adults learn and exhibit improved parenting skills					
2. Parents and other adults learn and exhibit improved family functioning skills					
<i>In the rows below, please include any additional indicators for NPI 6.3 that were not captured above.</i>					

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Goal 6: Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive environments.

NPI 6.2: Emergency Assistance

Problem Statement (Continued)

Hundreds of homeless families and individuals throughout the county cannot secure shelter each night. Emergency shelters provided by the various cities have met vital needs during the winter season and efforts need to continue. The number of chronically homeless families in San Diego County continues to increase. In addition, CAP contracted service providers report that many more families are becoming homeless as the recession worsens.

Given high housing costs, utilities and the overall high cost of living in San Diego County, indigent families have difficulty addressing food and nutrition needs appropriately. Homeless families with children and vulnerable individuals, such as seniors and pregnant women, are especially at-risk.

Delivery Strategies

Homeless issues are addressed through CAP's Family Self-Sufficiency year-round program funded with CSBG dollars and the Shelter Voucher Program. FSS providers address homelessness as part of their case management strategy, which includes an assessment for families' risk status in the area of shelter. The Shelter Voucher Program is a collaboration between cities, the local emergency and transitional shelter (primarily the City of San Diego) and the County to provide hotel/motel vouchers, and a continuum of services that includes case management, food, and transportation services primarily to homeless families with minor children, seniors and persons with disabilities. Additionally, the distribution of vouchers is coordinated with the Local Designated Board that distributes FEMA Emergency Shelter funds. In effect, the Voucher program now provides shelter year round. Case management services are designed to enable the movement of families into transitional and permanent housing, employment or securing permanent income by removing barriers and providing appropriate resources.

In addition to the FSS program, homeless services are provided through a seasonal Rotational Shelter program which is funded through a partnership between CAP and the City of San Diego. The program, which utilizes congregations in churches and synagogues, provides shelter and employment services to homeless families and individuals.

Contractor Name: County of San Diego, Health and Human Services Agency, CAP
Contact Person and Title: Barbara Jimenez, Program Director, Community Action Partnership
E-
Phone: (619) 338-2799 mail: barbara.jimenez@sdcounty.ca.gov Fax: (619) 338-2778

Program Activities

Specific activities that FSS providers will employ to address housing issues include:

1. Providing emergency shelter and food for families, adults and youth. Priority is given to families with children, pregnant women, disabled individuals and seniors.
2. Providing case management services to homeless families/individuals, that includes financial and employment services as well as referrals to public assistance programs.
3. Providing rental deposit assistance, as funding permits.
4. Establishing relationships with both public (such as Section 8) and private low income housing resources.
5. Assisting program participants to locate and obtain permanent housing.
6. Continuing to promote the development of service delivery networks for homeless families and individuals.

Specific activities that FSS providers will employ to address provision of emergency assistance include:

1. Providing crisis intervention to families and individuals.
2. Partnering with other non-profit organizations and agencies to assist families in need.
3. Developing a regional based Homeless Collaborative Service Network of community based agencies committed to eliminating homelessness through self-sufficiency services.
4. Follow-up services to include resources that provide more long-term solutions.

CAP San Diego is on both the Local Designated Board (FEMA) and the Emergency Food and Shelter Program Board. In addition, CAP San Diego is a board member of the Regional Task Force on the Homeless a group that serves as a central clearinghouse on homelessness in San Diego County and the Regional Continuum of Care Council, whose members provide homeless services. CAP San Diego actively participated in the Plan To End Chronic Homelessness, a regional plan developed by public-private partners to address homelessness in San Diego County.

CAP San Diego will continue to fund agencies providing assistance to low-income families to help achieve self-sufficiency. Furthermore, the San Diego Community Action Partnership will continue facilitating partnerships with community-based organizations, and private/public entities, including schools. CAP will also continue to support in the development of community Family Resource Centers where families more readily access services with the reassurance that their needs will be met in their communities.

Contractor Name: County of San Diego, Health and Human Services Agency, CAP
Contact Person and Title: Barbara Jimenez, Program Director, Community Action Partnership
E-
Phone: (619) 338-2799 mail: barbara.jimenez@sdcounty.ca.gov Fax: (619) 338-2778

NPI 6.3: Child and Family Development

Problem Statement

Child and family development is a multi-dimensional issue and is impacted by a multitude of variables. Healthy families exhibit and/or possess positive attributes in each of the dimensions that impact family functioning. These dimensions include risk vs. non-risk behavior, safety, effective parenting, and physical and emotional health and well-being.

Family relations and parenting are closely intertwined in both their causes and effects. Often the child who is abused or neglected grows up to be abusive and neglectful of his/her children. Similarly, studies indicate that domestic violence is cyclical. Thus parenting issues may be symptomatic of prior abuse and/or lack of appropriate role models. Another potential cause is an individual's inability to engage in healthy interpersonal relationships due to mental health and/or substance abuse issues.

Additionally, irrespective of family dynamics, far too many youth engage in at-risk behavior such as gang activity and drug abuse. Many youth also engage in criminal and/or runaway behavior that lead them to enter the juvenile justice system often placing them on a self-destructive path that has life long implications both to them individually and to their families. Studies indicate that some of the at-risk behaviors are associated with suicides and homicides.

Delivery Strategies

Because multiple factors contribute to the disruption in a child's life, CAP San Diego addresses child and family development in a continuum of services. To optimize family functioning, CAP focuses attention on the family as a unit in its Family Self-Sufficiency program. The Juvenile Diversion program addresses the needs of at-risk youth. In partnership with a local charter school, CAP provides school-based self-sufficiency services to assist middle-school youth in their learning environment, eliminate barriers and achieve academic success. These programs are detailed below:

Program Activities

The **Family Self-Sufficiency** program:

1. Begins with a risk assessment which is at the core of the service plan, to identify and address barriers to self-sufficiency
2. Develops attainable goals that build on strengths
3. Works with the family to establish realistic goals to resolve barriers relating to employment, social/emotional/physical health and competence.
4. Develops an action plan that is specific to the family's needs and strengths, which then serves as a contract.
5. Refers clients to other agencies for specialized services

Contractor Name: County of San Diego, Health and Human Services Agency, CAP
Contact Person and Title: Barbara Jimenez, Program Director, Community Action Partnership
E-
Phone: (619) 338-2799 mail: barbara.jimenez@sdcounty.ca.gov Fax: (619) 338-2778

6. Establishes close linkages with agencies providing services to clients with more complex psychosocial problems.
7. Requires that contracted service providers partner with other county agencies such as Child Welfare Services and First 5 to ensure that county funded services which provide prevention and early intervention for children and their families are accessible to them.
8. Ensures that the family or individual either has medical insurance or applies for medical insurance.
9. Provides follow-up services to ensure completion of the case plan.
10. Provides linkages to public assistance programs.
11. Develops links to family members, whenever appropriate, who can provide important resources such as child care to enable individuals to obtain employment and also provide emotional support for persons who are in crisis.

Juvenile Diversion program provides services to youth between the ages of 8-17 years, who demonstrate behaviors typically associated with delinquency and which are likely to result in involvement and re-involvement with the juvenile justice system. These services are provided as an alternative to more formal action with the juvenile justice and education systems. This program is key component in a continuum of services including juvenile diversion programs operated by law enforcement and Probation. The Juvenile Diversion program incorporates the public health model that captures multiple domains: physical, emotional, behavioral, social familial, and environment to prevent entry to re-entry into the Juvenile Justice System. Services include:

- Homework assistance and tutoring.
- Tobacco education and preventive services designed to increase users awareness of the risks associated with tobacco use.
- Group sessions that foster improved communication skills and increased self-esteem.
- Substance abuse prevention education.
- Interpersonal skills and self-esteem development.
- Services designed to identify, address and mitigate factors, which tend to promote delinquent behavior.
- Activities which promote personal identification with the community and the development of a healthy self-esteem.
- Counseling services to resolve issues and conflicts.
- Short to intermediate-term residential care to youth.
- Development of family reunification plans.

Contractor Name: County of San Diego, Health and Human Services Agency, CAPContact Person and Title: Barbara Jimenez, Program Director, Community Action PartnershipE-
Phone: (619) 338-2799 mail: barbara.jimenez@sdcounty.ca.gov Fax: (619) 338-2778

School-Based Self-Sufficiency services are provided by a community-based social service agency working in close coordination with school staff and the community in a charter school. The program:

1. Works with other community agencies to ensure that a continuum of health and social services is available to middle-school children.
2. Provides gang intervention, nutrition and exercise classes.
3. Provides mentorship and counseling specifically to children of incarcerated parents and those living in "kinship" situations.
4. Provides tutoring and counseling.
5. Provides curriculum development that addresses: Crisis intervention; positive parenting conflict resolution; cross-cultural development; drug abuse prevention; and self-esteem development.
6. Links with other self-sufficiency providers.
7. Ensures a coordinated approach both at school and at home.

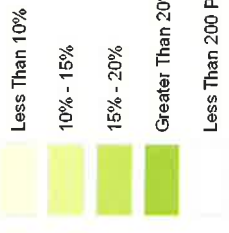
In addition, CAP requires that FSS contractors partner with other agencies such as Child Welfare Services and First 5 to ensure that county funded services through the Mental Health Services Act (MHSA) which provide prevention and early intervention for children and their families are made available to them.

APPENDIX B – ASSET MAPS

SERVICE MAP (SAN DIEGO COUNTY)

x miles
Distance to Nearest Service
92000

% of Persons Below Poverty



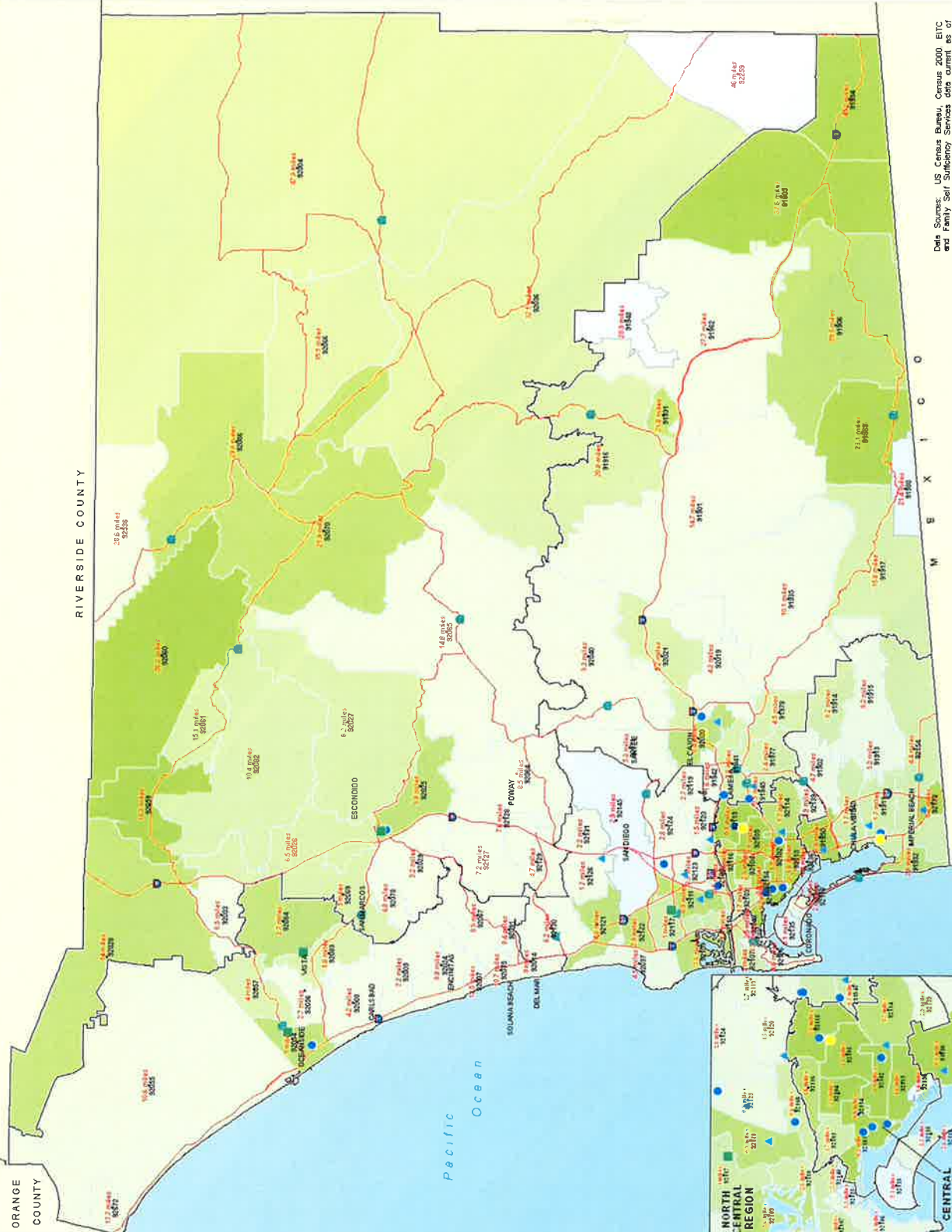
Services

- Tax Service (ETIC)
- Family Self-Sufficiency (FSS)
- Family Resource Center
- ETIC and FSS

- ZIP Codes
- HHSA Regions



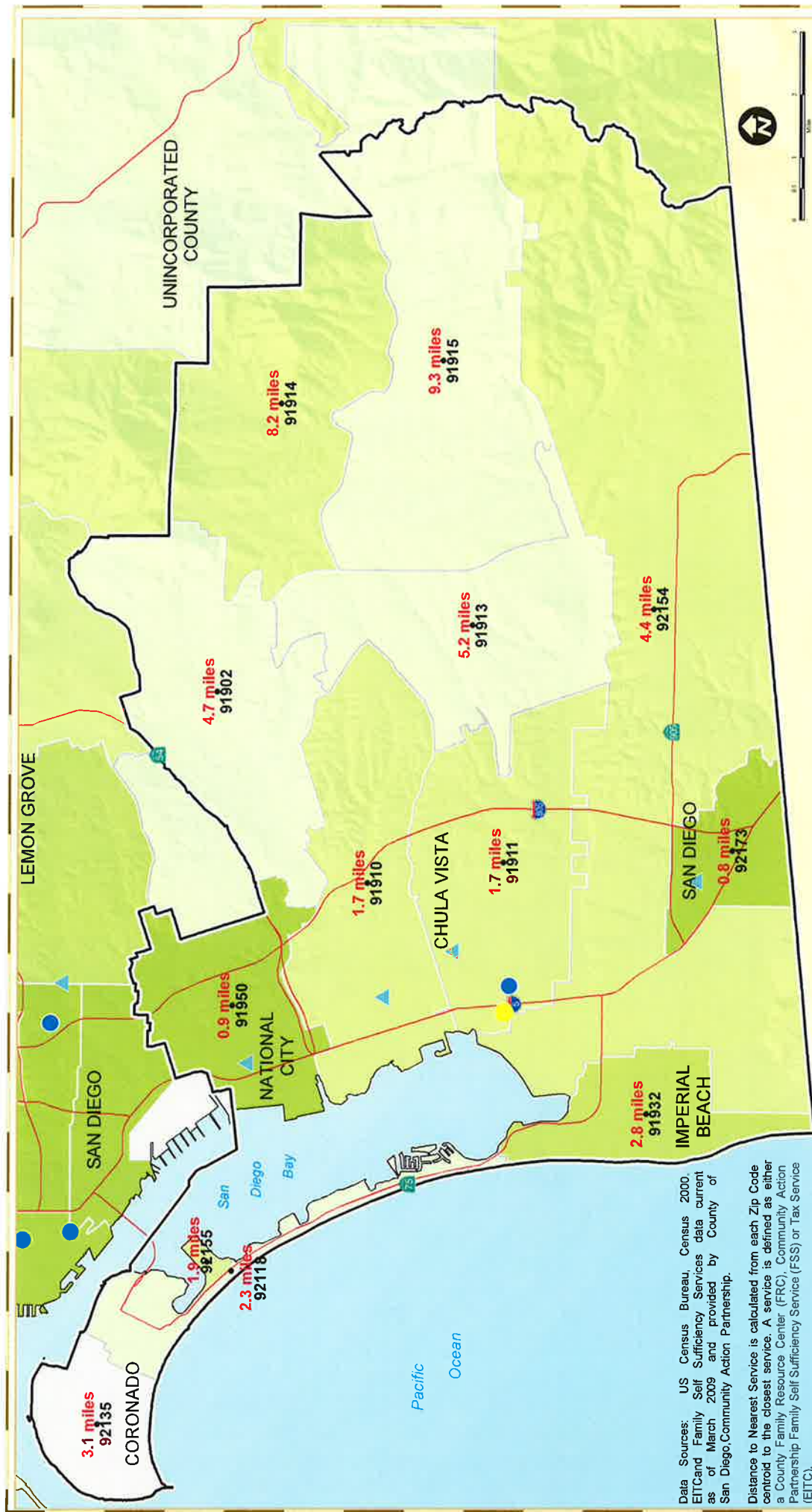
SaGIS
 Planning & Geographic Information Systems
 1555 La Jolla Village Drive, Suite 200
 San Diego, CA 92161
 Phone: (619) 594-2000
 Fax: (619) 594-2001
 Email: info@sa-gis.com
 Website: www.sa-gis.com



Data Sources: US Census Bureau, Census 2000, ETIC and Family Self-Sufficiency Services data current as of 12/31/2000, and provided by County of San Diego, Community Action Partnership.

Distance to Nearest Service is calculated from each Zip Code to the nearest service center. The nearest service center is a County Family Resource Center (FRC), Community Action Partnership Family Self-Sufficiency Service (FSS) or Tax Service (ETIC).





Distance to Nearest Service is calculated from each Zip Code centroid to the closest service. A service is defined as either a County Family Resource Center (FRC), Community Action Partnership, Family Self Sufficiency Service (FSS) or Tax Service (EITC).

**SERVICE MAP
(SOUTH REGION)**



SanGIS
30 Years San Diego Council


 County of San Diego
 Health and Human Services
 Planning & Operations Department
 Office of Emergency Management

Map 483
 Project: OSM_0132
 Map Date: March, 2009

Office

ZIP Codes

Services

▲ Tax Service (EITC)

Family Self-Sufficiency

Both

- Family Resource Center

% of Persons Below Poverty

Less Than 10%

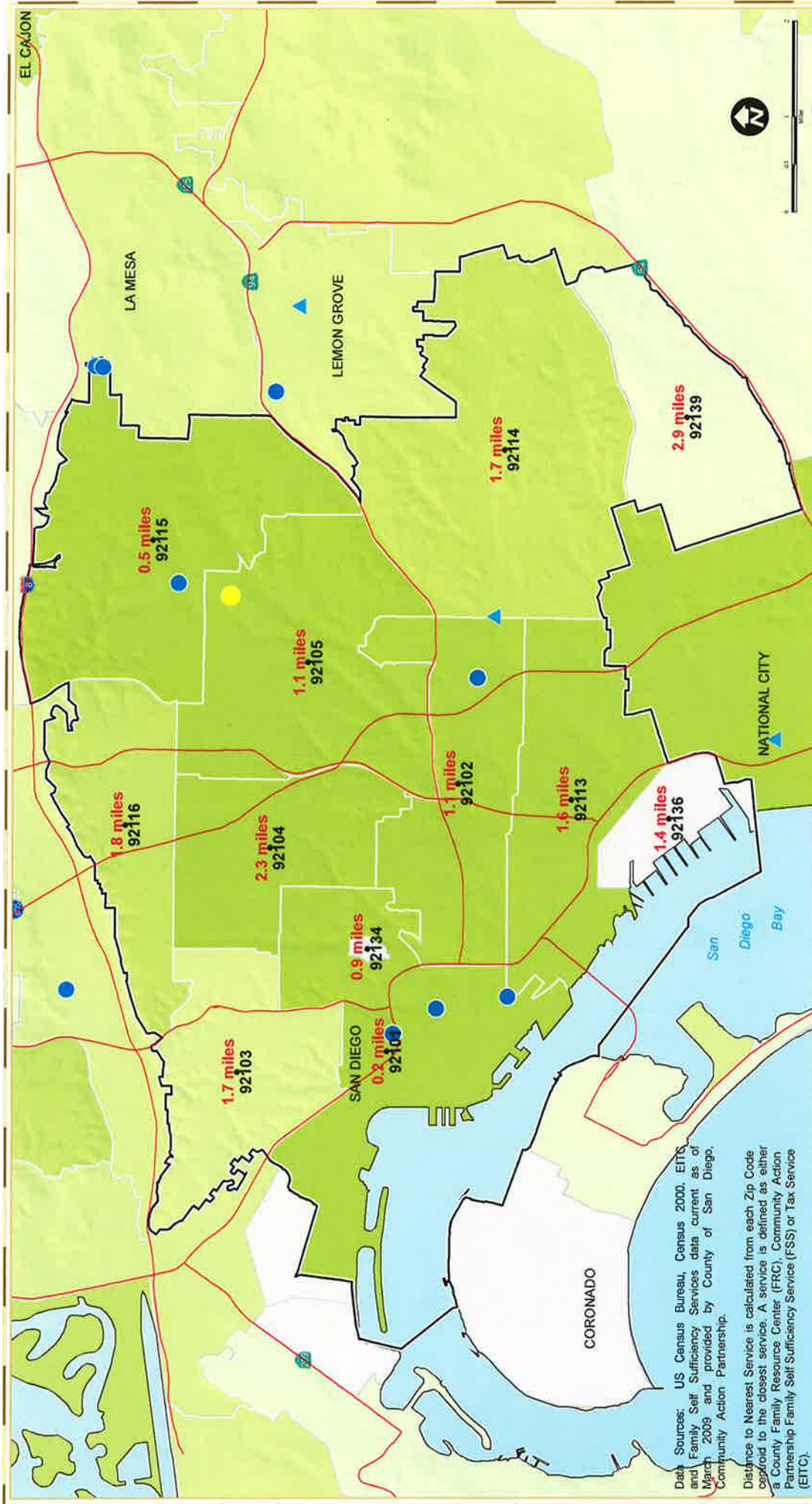
10% - 15%

15% - 20%

Greater Than 20%

Less Than 200 Persons

x miles
92000



SERVICE MAP

(CENTRAL REGION)

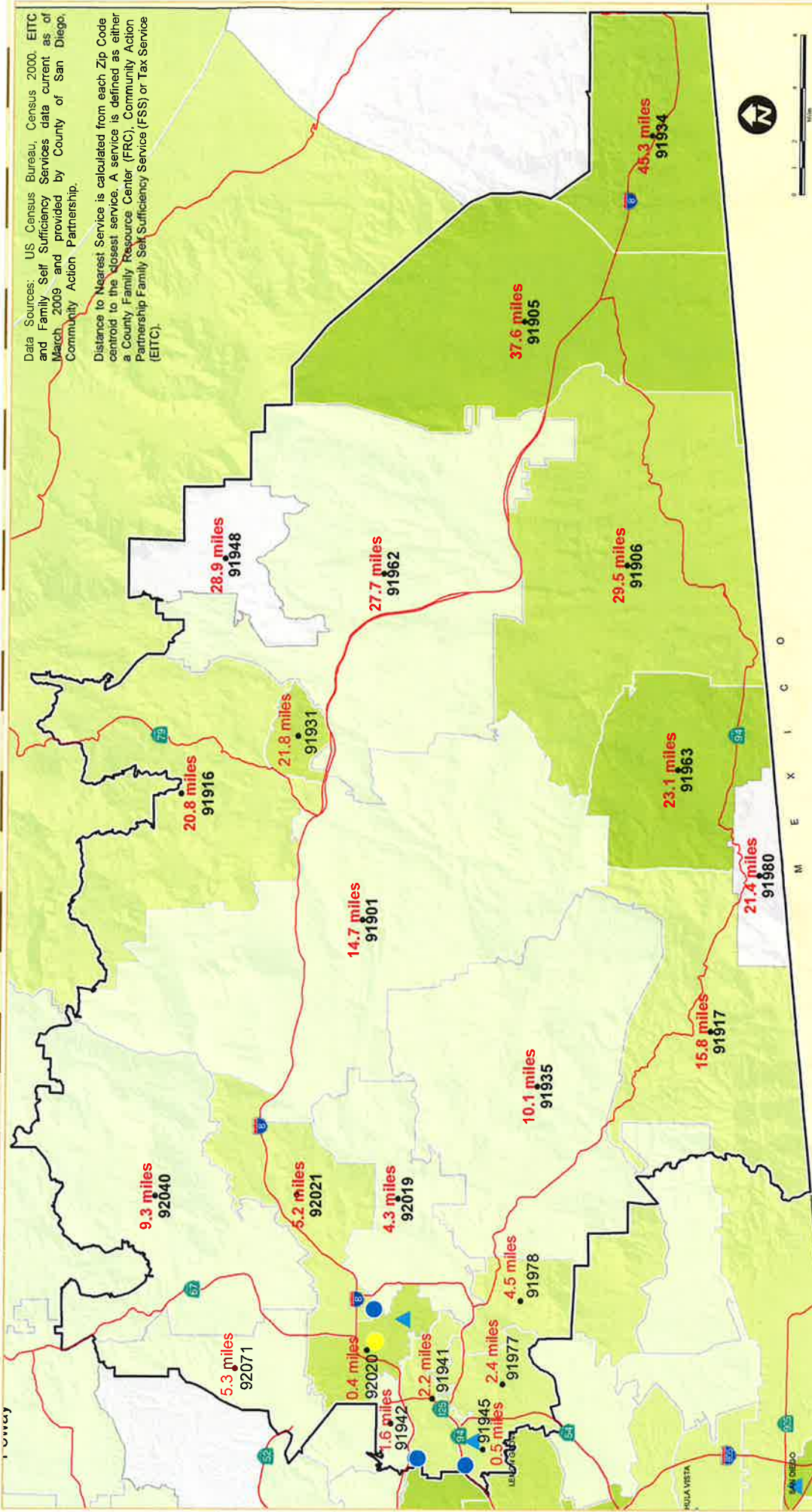
Distance to Nearest Service

x miles
92000



Data Sources: US Census Bureau, Census 2000, EITC and Family Self-Sufficiency Services data current as of March 2009 and provided by County of San Diego Community Action Partnership.

Distance to Nearest Service is calculated from each Zip Code centroid to the closest service. A service is defined as either a County Family Resource Center (FRC), Community Action Partnership Family Self-Sufficiency Service (FSS) or Tax Service (EITC).



LEGEND

92000

ZIP Codes

HHS Regions

Services

Tax Service (EITC)

Family Self-Sufficiency

Both

Family Resource Center

% of Persons Below Poverty

Less Than 10%

10% - 15%

15% - 20%

Greater Than 20%

Less Than 200 Persons

SERVICE MAP (EAST REGION)

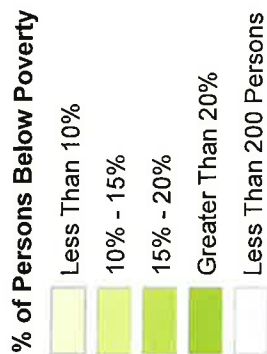
x miles

Distance to Nearest Service




92000

Map 465
CSM 0132
Map Date: March, 2009
Contact: Adrienne M. Perry, 619.515.4284

SERVICE MAP (NORTH CENTRAL REGION)

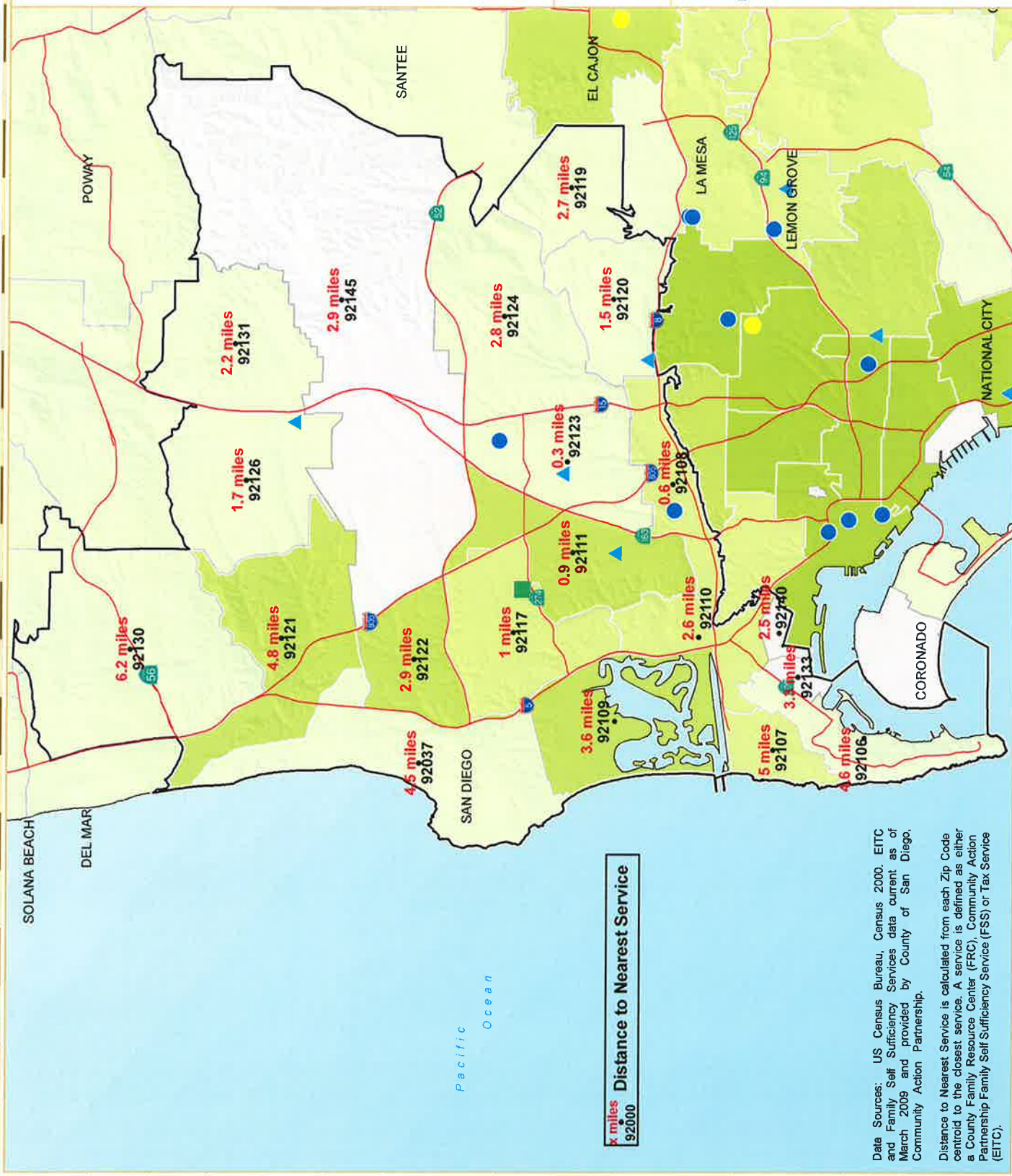


Services

-  Tax Service (EITC)
-  Family Self-Sufficiency
-  FSS & EITC
-  Family Resource Center
- ZIP Codes
- HHSA Regions



Map: 496
Project: OSM 0132
Map Date: March, 2009
Contact: Adrienne M. Perry 619.515.4294



Data Sources: US Census Bureau, Census 2000. EITC and Family Self Sufficiency Services data current as of March 2009 and provided by County of San Diego, Community Action Partnership.

Distance to Nearest Service is calculated from each Zip Code centroid to the closest service. A service is defined as either a County Family Resource Center (FRC), Community Action Partnership Family Self Sufficiency Service (FSS) or Tax Service (EITC).

SERVICE MAP

(NORTH INLAND REGION)

x miles
92000
Distance to Nearest Service

RIVERSIDE COUNTY

Pacific Ocean



0 1 2 3 4 5 Miles

LEGEND

ZIP Codes

HHSA Regions

Services

Tax Service (EITC)

Family Self-Sufficiency

Family Resource Center

% of Persons Below Poverty

Less Than 10%

10% - 15%

15% - 20%

Greater Than 20%

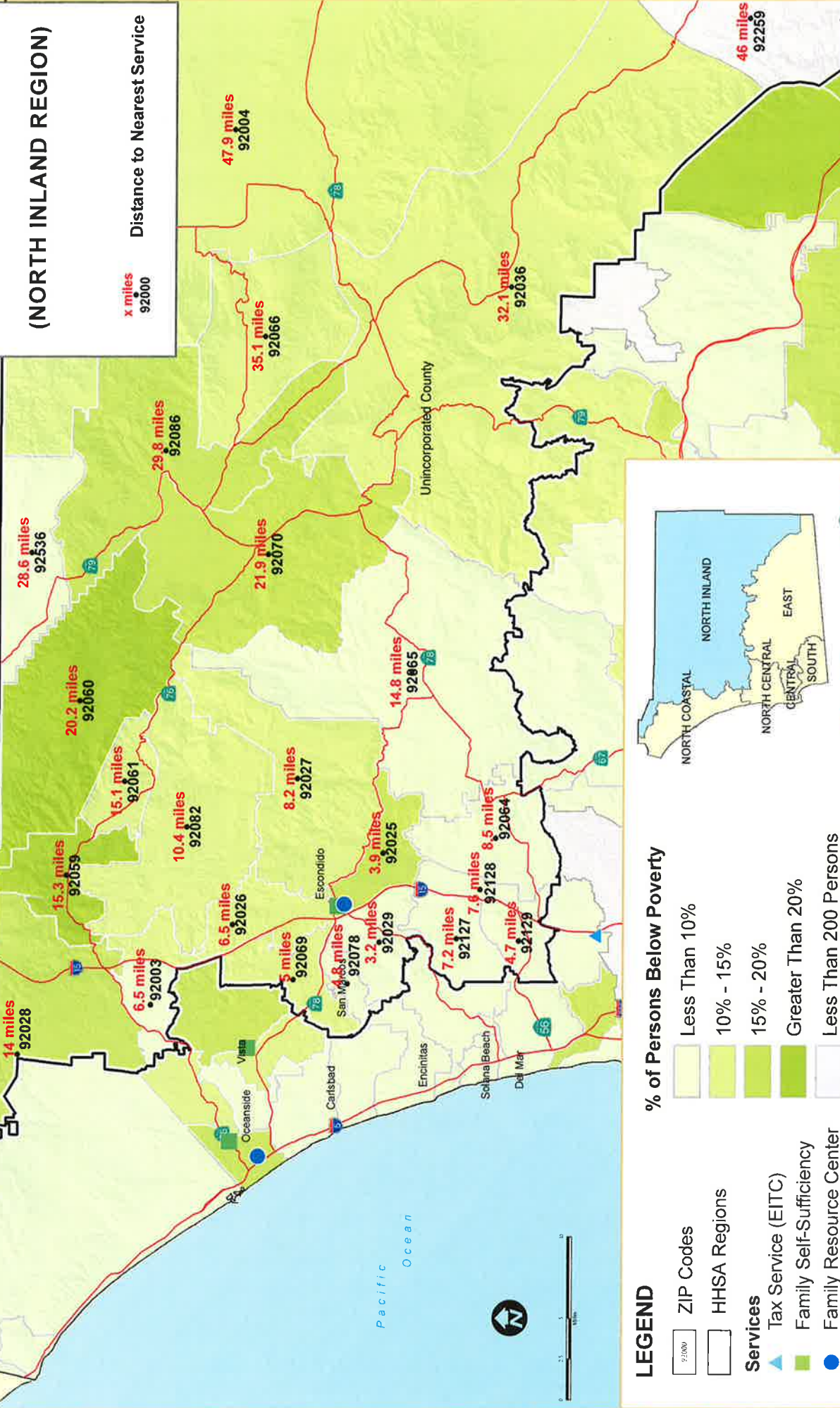
Less Than 200 Persons

Distance to Nearest Service is calculated from each Zip Code centroid to the closest service. A service is defined as either a County Family Resource Center (FRC), Community Action Partnership, Family Self-Sufficiency Service (FSS) or Tax Service (EITC).

Data Sources: US Census Bureau, Census 2000, EITC and Family Self-Sufficiency Services data current as of March 2009 and provided by County of San Diego, Community Action Partnership.



SanGIS
County of San Diego
North and Inland Services Support
Map 409
Project CSN 0132
Map Date March, 2009
Contact: Adrienne M. Perry, 619.515.4294



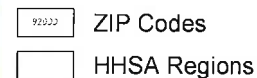
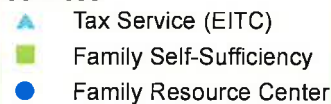
ORANGE
COUNTY

SERVICE MAP (NORTH COASTAL REGION)

% of Persons Below Poverty



Services



Data Sources: US Census Bureau, Census 2000, EITC and Family Self Sufficiency Services data current as of March 2009 and provided by County of San Diego, Community Action Partnership.

Distance to Nearest Service is calculated from each Zip Code centroid to the closest service. A service is defined as either a County Family Resource Center (FRC), Community Action Partnership Family Self Sufficiency Service (FSS) or Tax Service (EITC).

Map: 497
Project: OSM_0132
Map Date: March, 2009
Contact: Adrienne M. Perry, 619.515.4294



County of San Diego
Health and Human Services
Strategic Planning & Operational Support
Office of Strategic Management



**APPENDIX C – DOCUMENTATION OF PUBLIC
HEARING ANNOUNCEMENTS**

P.O. Box 120191, San Diego, CA 92112-0191

AFFIDAVIT OF PUBLICATION

HHSA

COMMUNITY ACTION PARTNERSHIP

1255 IMPERIAL AVENUE, STE. 743

SAN DIEGO, CA 92101

STATE OF CALIFORNIA } ss.
County of San Diego }

The Undersigned, declares under penalty of perjury under the laws of the State of California: That she is a resident of the County of San Diego. That she is and at all times herein mentioned was a citizen of the United States, over the age of twenty-one years, and that she is not a party to, nor interested in the above entitled matter; that she is Chief Clerk for the publisher of

The San Diego Union-Tribune,

a newspaper of general circulation, printed and published daily in the City of San Diego, County of San Diego, and which newspaper is published for the dissemination of local news and intelligence of a general character, and which newspaper at all the times herein mentioned had and still has a bona fide subscription list of paying subscribers, and which newspaper has been established, printed and published at regular intervals in the said City of San Diego, County of San Diego, for a period exceeding one year next preceding the date of publication of the notice hereinafter referred to, and which newspaper is not devoted to nor published for the interests, entertainment or instruction of a particular class, profession, trade, calling, race, or denomination, or any number of same; that the notice of which the annexed is a printed copy, has been published in each regular and entire issue of said newspaper and not in any supplement thereof on the following date, to-wit

OCTOBER 13, 2008

Marsi Bowers
Chief Clerk for the Publisher



Affidavit of Publication of

Legal Advertisement

Ad 0010128054

Ordered by: CORINNE RODRIGUEZ

**COUNTY OF
SAN DIEGO
PUBLIC HEARINGS**

The Community Action Partnership (CAP) of San Diego County will hold public hearings in the Central and East regions of the County to give interested community members an opportunity to provide input on social services for low-income families in San Diego.

The mission of CAP in San Diego is to reduce poverty and lessen its impact for San Diego's low-income residents.

The public hearings will be held to encourage participation from the public and service providers regarding the unique needs of their communities.

Times and Locations

Monday,
October 20th, 2008
6:00 pm
City Heights
Recreation Center
4380 Landis Avenue,
San Diego, CA 92115

Tuesday,
November 4th, 2008
1:30 to 2:30 pm
El Cajon Collaborative
Cajon Valley Union
School District
Board Room
750 E. Main Street
El Cajon, CA 92020

**Be sure that your
voice is heard - We
need you!**

Written testimony will also be accepted.

For more information
contact:

Juana Duenas -
Community Action
Partnership at
juana.duenas@
sdcountry.ca.gov

Proof of Publication
(2015.5 C.C.P.)

STATE OF CALIFORNIA
COUNTY OF SAN DIEGO

I am a citizen of the United States and a resident of the county aforesaid; I am over the age of eighteen years and I am not a party to or interested in the notice published. I am the chief legal advertising clerk of the publisher of

The Californian

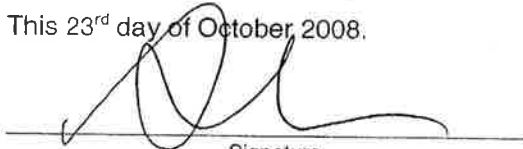
a newspaper of general circulation, printed and published weekly in the city of El Cajon, County of San Diego, and which newspaper has been adjudged a newspaper of general circulation by the Superior Court of the County of San Diego, State of California, under the date of January 18, 1980, Case No. 51488, that the notice, of which the annexed is a printed copy, has been published in each regular and entire issue of said newspaper and not in any supplement thereof on the following dates, to-wit:

10/23
all in the year 2008

I certify (or declare) under the penalty of perjury that the foregoing is true and correct.

Dated at Chula Vista, California

This 23rd day of October, 2008.


Signature

San Diego Neighborhood Newspapers
The East County Californian
119 N. Magnolia Ave.
El Cajon, CA 92020
619.441-1440

This space is for the County Clerk's filing stamp.

Proof of Publication of
EC19463

COUNTY OF SD PUBLIC HEARING

COUNTY OF SAN DIEGO
PUBLIC HEARING

The Community Action Partnership (CAP) of San Diego County will hold a public hearing in the East region of the County to give interested community members an opportunity to provide input on social services for low income families in San Diego.

The mission of CAP in San Diego is to reduce poverty and lessen its impact for San Diego's low-income residents.

The public hearing will be held to encourage participation from the public and service providers regarding the unique needs of their communities.

Time and Location

Tuesday, November 4th,
2008 - 1:30 to 2:30 pm
El Cajon Collaborative
Cajon Valley Union School
District Board Room
750 E. Main Street
El Cajon, CA 92020

**Be sure that your voice
is heard - We need you!**
Written testimony will also be accepted.

For more information contact:
Juana Duenas - Community Action Partnership at
juana.duenas@sdcounty.ca.gov

Californian
10/23/08-19463

County of San Diego
Health and Human Services Agency
Community Action Partnership

OCT 27 2008

RECEIVED
Administration

PROOF OF PUBLICATION
(2015.5 C.C.P.)

This space is for the County Clerk's filing stamp.

STATE OF CALIFORNIA,

County of San Diego:

I am a citizen of the United States and a resident of the county aforesaid; I am over the age of eighteen years, and not a party to or interested in the above-entitled matter. I am the principle clerk of the printer of THE STAR-NEWS, a newspaper of general circulation, published ONCE WEEKLY in the city of **CHULA VISTA** and the South Bay Judicial District, County of San Diego, which newspaper has been adjudged a newspaper of general circulation by the Superior Court of the County of San Diego, State of California, under the date of January 18, 1973, Case Number 71752; that the notice, of which the annexed is a printed copy (set in type not smaller than nonpareil), has been published in each regular and entire issue of said newspaper and not in any supplement thereof on the following dates, to-wit:

1/9

all in the year 2009.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Dated at Chula Vista, California 91910

this 9th day of January 2009.

Signature


PRINCIPAL CLERK

Proof of Publication of

CV35958

Public Hearing

**COUNTY OF
SAN DIEGO**

PUBLIC HEARING

Community Action Partnership (CAP) of San Diego County will hold a public hearing in the South Bay region of the County to give interested community members an opportunity to provide input on social services for low income families San Diego.

The mission of CAP in San Diego is to reduce poverty and lessen its impact for San Diego's low-income residents.

A public hearing will be held to encourage participation from the public and service providers regarding the unique needs of their communities.

Time and Location:

Wednesday, January
14, 2009 - 9:00 a.m.
South Region - Family
Resource Center
Health and Human
Services Agency
690 Oxford Street,
Conference Rm. 1
(In the lobby)
Chula Vista, CA 91911

Be sure that your
voice is heard -
We need you!

Written testimony will
also be accepted.
For more information
contact:

Juana Duenas -
Community Action
Partnership at
juana.duenas@
sdcounty.ca.gov

CV35958 1/9/09

P.O. Box 120191, San Diego, CA 92112-0191

AFFIDAVIT OF PUBLICATION

 **FILE**

COMMUNITY ACTION PARTNERS
1255 IMPERIAL AVENUE, STE. 743
SAN DIEGO, CA 92101

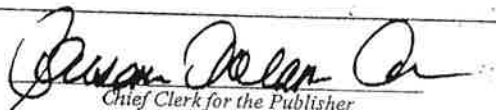
STATE OF CALIFORNIA) ss.
County of San Diego)

The Undersigned, declares under penalty of perjury under the laws of the State of California That she is a resident of the County of San Diego That she is and at all times herein mentioned was a citizen of the United States, over the age of twenty-one years, and that she is not a party to, nor interested in the above entitled matter; that she is Chief Clerk for the publisher of

The San Diego Union-Tribune

a newspaper of general circulation, printed and published daily in the City of San Diego, County of San Diego, and which newspaper is published for the dissemination of local news and intelligence of a general character, and which newspaper at all the times herein mentioned had and still has a bona fide subscription list of paying subscribers, and which newspaper has been established, printed and published at regular intervals in the said City of San Diego, County of San Diego, for a period exceeding one year next preceding the date of publication of the notice hereinafter referred to, and which newspaper is not devoted to nor published for the interests, entertainment or instruction of a particular class, profession, trade, calling, race, or denomination, or any number of same; that the notice of which the annexed is a printed copy, has been published in each regular and entire issue of said newspaper and not in any supplement thereof on the following date, to-wit

FEBRUARY 4, 2009


Chief Clerk for the Publisher



Affidavit of Publication of

Legal Advertisement

Ad # 10189341

Ordered by: CORINNE RODRIGUEZ

PUBLIC HEARING

COUNTY OF SAN DIEGO

Community Action Partnership (CAP) of San Diego County will hold a public hearing in North County to give interested community members an opportunity to provide input on social services for low income families San Diego.

The mission of CAP in San Diego is to reduce poverty and lessen its impact for San Diego's low-income residents.

A public hearing will be held to encourage participation from the public and service providers regarding the unique needs of their communities.

Time and Location:

Thursday, February 5th, 2009 at 4:30 PM
Bread of Life
Rescue Mission
1919 Apple Street at
Greenbrier Drive
Suites J & K
Oceanside, CA 92054

Be sure that your voice is heard. We need you!

Written testimony will also be accepted.

For more information contact:

Juana Duenda
Community Action
Partnership at:
Juana.duenda@sdcounty.ca.gov

County of San Diego
Health and Human Services Agency
Community Action Partnership

FEB 18 2009

RECEIVED
Administration

APPENDIX D

FIGURE 1. AGENCIES

HEALTH AND HUMAN SERVICES AGENCY – NORTH REGION
HEALTH AND HUMAN SERVICES AGENCY – NORTH CENTRAL REGION
RADY'S CHILDREN HOSPITAL
NORTH COSTAL HOME PROVIDERS
CLAIREMONT COALITION
CLAIREMONT TOWN COUNCIL
CENTRAL PUBLIC HEALTH CENTER
NORTH COUNTY LIFELINE
INTERNATION RESCUE COMMITTEE
EAST COUNTY REFUGEE CENTER
EL CAJON COLLABORATIVE
FAMNET SAN DIEGO
BETHLEHEM FOOD PANTRY
CENTER FOR COMMUNITY SOLUTIONS
CRISIS HOUSE
HEALTH AND HUMAN SERVICES – EAST REGION
CUYAMACA COLLEGE
HOME START INC.
HARMONIUM, INC
COMMUNITY SERVICES FOR FAMILIES
BIRTH PARENT ASSOCIATION
JEWISH FAMILY SERVICES
BREAD OF LIFE RESCUE MISSION – NORTH COUNTY
INTERFAITH SHELTER NETWORK
MAAC PROJECT
MID CITY CAN
SAY SAN DIEGO (2)
SAY SAN DIEGO/CLAIREMONT HEALTH START
SD COALITION FOR THE HOMELESS
SD HUNGER COALITION COUNTY WIDE
SDSU FOUNDATION WIC PROGRAM
SDVCS
SOUTH BAY COMMUNITY SERVICES(2)
CHULA VISTA COMMUNITY COLLABORATIVE
SOUTH PUBLIC HEALTH CENTER
VOLUNTEERS OF AMERICA
SUPPORTIVE PARENT INFORMATION NETWORK (SPIN)
